

USAID
FROM THE AMERICAN PEOPLE



Understanding Monitoring and Evaluation: Concepts and Common Methods for Behaviour Change Communications Campaigns



FACILITATOR'S GUIDE



USAID
FROM THE AMERICAN PEOPLE



This publication was produced for review by the United States Agency for International Development (USAID). It was prepared by ICF International as part of the USAID, funded by Communications Support for Health, and implemented by Chemonics International.

Understanding Monitoring and Evaluation: Concepts and Common Methods for Behaviour Change Communications Campaigns

Facilitator's Guide Final

**USAID Communications Support for Health Project
Lusaka, Zambia**

Acknowledgements

This guide was written, pre-tested, and launched as part of the United States Agency for International Development (USAID)-funded Communications Support for Health (CSH) project in Zambia. The project is implemented by Chemonics International in partnership with ICF International and The Manoff Group.

Contents

Acronyms	5
Welcome and Objectives.....	7
Training Agenda.....	11
Administrative Task 1: Training Registration.....	17
Session 1: Workshop Introduction	19
Administrative Task 2: Training Pre-Test	29
Session 2: What Is Monitoring?	33
Energiser 1: Rainstorm	47
Session 3: What Is Evaluation?.....	51
Session 4: Foundations of the M&E Plan	67
Session 5: M&E Frameworks.....	89
Administrative Task 3: Day One Evaluation	105
Administrative Task 4: Day Two Reporting	107
Session 6: Indicators.....	131
Energiser 2: Mumble Jumble	153
Session 7: Data Collection	181
Administrative Task 5: Day Two Evaluation	201
Administrative Task 6: Day Three Reporting	203
Session 8: Evaluation Design	213
Supplemental Session: Approaches to Statistical Data Analysis	239
Session 9: Data Presentation.....	253
Energiser 3: Toss the Ball	281
Session 10: Data Interpretation	285
Session 11: Putting It All Together.....	303

Session 12: In Closing	311
Administrative Task 7: Day Three Evaluation	317
Administrative Task 8: Training Post-Test	319
Notes	320

Acronyms

ANC	Antenatal care
CARMMA	Campaign on Accelerated Reduction of Maternal, Newborn and Child Mortality in Africa
CSH	Communications Support for Health project
CSO	Civil society organisation
DHS	Demographic and Health Survey
FP	Family planning
GRZ	Government of the Republic of Zambia
HIV/AIDS	Human Immunodeficiency Virus/Acquired Immune Deficiency Syndrome
HIV+	HIV positive
HMIS	Health Management Information System
IEC/BCC	Information, education, communication/behaviour change communication
IPC	Interpersonal communication
ITNs	Insecticide-treated nets
M&E	Monitoring and evaluation
MCP	Multiple concurrent partnerships
MIS	Malaria Indicator Survey
MMR	Maternal mortality ratio
MOH	Ministry of Health
MTCT	Mother-to-child transmission
NAC	National HIV/AIDS/STI/TB Council
NASF	National HIV and AIDS Strategic Framework
PEPFAR	President's Emergency Plan for AIDS Relief
PMEP	Performance Monitoring Evaluation Plan
PMTCT	Prevention of mother-to-child transmission
SM	Safe motherhood
SMAG	Safe motherhood action group
SML	Saving Mother's Lives Campaign
TWG	Technical working group
USAID	United States Agency for International Development

Welcome and Objectives

This facilitator’s guide is intended to support the delivery of the training, “Understanding Monitoring and Evaluation: Concepts and Common Methods for Behaviour Change Communications Campaigns.” The training was developed by the United States Agency for International Development-funded Communications Support for Health project in Zambia. The objective of this training is to enhance the knowledge and skills of participants in what is needed to appropriately monitor and evaluate communications campaigns. Specifically, after attending the training, participants should be able to

- Explain the role of monitoring and evaluation (M&E) for behaviour change communications (BCC) and how it is different from M&E for health service delivery;
- Create M&E frameworks;
- Choose M&E indicators;
- Select an appropriate evaluation design, data sources, and collection methods;
- Design an M&E plan;
- Identify effective presentation and interpretation practices; and
- Make recommendations for campaign revisions.

The following pages will provide facilitators and training coordinators with guidance for preparing, conducting, and evaluating the training.

Overview of the Training

The training will take place over a 3-day period. Each day will be organised into the following three types of activities:

- **Sessions**—walking through the curriculum in the PowerPoint slides with the use of handouts. Sessions will also include participant discussions and exercises specific to the curriculum.
- **Tea breaks and lunch**—providing an hour for lunch each day, as well as morning and afternoon tea breaks.
- **Energisers**—offering activities to give participants a little break and help them refresh for the subsequent sessions.

The sessions include

- **Lectures**—presentation of the curriculum content,
- **Group discussions and participatory exercises**—opportunities for participants to share their experience and put the curriculum content into action, and
- **Daily reporting**—participants giving an overview of the previous day’s highlights.

The training also incorporates an evaluation component, including

- Pre- and post-tests to assess change in knowledge of formative research, and
- Daily evaluations to gather immediate feedback on the training.

The facilitators should meet during the evening after each day of the training to discuss the findings from the daily evaluation and adjust the subsequent training days, as possible. The training team should also meet after the completion of the training to discuss the pre- and post-test findings, daily evaluations, and overall feedback.

Training Highlights

Participants will learn about the monitoring and evaluation process as it relates to behaviour change communications campaigns, from the initial planning with programming staff to discussions on how to use findings.

This training gives participants a chance to practise applying knowledge and techniques addressed in the curriculum in a setting monitored by a trained researcher. Participants will work in small teams to make some key decisions in response to a scenario pertaining to a campaign related to HIV. The teams will meet throughout multiple sessions to address different aspects of the M&E process specific to the scenario and training curriculum.

Interactive Adult Learning

Although the training consists of a clearly defined curriculum, a primary objective is to incorporate the participants' experiences and knowledge into the discussion as much as possible. As illustrated in the slide guidance, many of the new topics in each of the sessions begin with a discussion of the participants' experiences. The facilitators need to create an environment in which participants feel comfortable and are continually encouraged to share their stories, ideas, and lessons learned related to formative research.

While much of the training is delivered through interactive sessions, the application of the concepts happens during the exercises related to the scenario. As M&E teams apply the training content to the scenario, they see how to create an M&E plan and how the findings from the plan should flow back into the planning and programming of the campaign. Facilitators will be available during the exercises to assist teams, as needed.

During the "report outs," participants give feedback and suggestions on their colleagues' work. This technique helps groups to identify gaps or issues in the M&E plans and improve their designs based on the feedback. This practice in critical thinking will help both programmatic and M&E staff plan for M&E in ways that will help create data that are useful for both managing and evaluating the campaign.

Skills and Experience Needed To Facilitate

Training skills: This guide is designed for experienced trainers who have a good understanding of M&E of BCC campaigns. The training curriculum assumes that trainers have experience and comfort in giving interactive presentations and in facilitating large- and small-group discussions.

M&E experience: Facilitators who have conducted and designed M&E studies of communications campaigns will be most equipped to lead this training.

Facilitator's Guide and Accompanying Slides

This guide provides instruction on the timing of each activity, purpose and objectives, methodologies, materials needed, implementation, and key discussion points. The key discussion points highlight the topics or issues that are most important to address in each of the sessions.

When the equipment and infrastructure allow, present the PowerPoint slides using a computer and LCD projector. If a computer and projector are not available, consider printing all or a selection of slides on transparencies and show them to the group using an overhead projector. Facilitators should test the equipment and identify a training team member who can help troubleshoot in case of an equipment failure. If it is not possible to project the slides, the participants can follow the sessions using their booklets, which contain copies of the PowerPoint slides.

Review the participant materials before the training to become completely familiar with what participants will be using during and after the training.

The facilitator and participants will also need the following materials during the training:

- Participant guide containing copies of slides and handouts,
- Flipchart paper,
- Markers,
- Football,
- Markers,
- Five postcards,
- Pre- and post-tests,
- Daily evaluation forms,
- Sign-in sheet,
- Certificate of training completion,
- Pens or pencils,
- Tape,
- Notecards or sticky notes,
- Name tags, and
- Exercise reference information from the participant guide consisting of
 - Malaria campaign plan with comments on missing or incorrect information, and
 - HIV/AIDS campaign scenario, including sample charts for data presentation, M&E plan, conceptual framework, and logic model.

Room Set-Up

Depending on the size of the group of participants, facilitators and training coordinators may need to arrange to use a room that allows space for all of the participants and is conducive to small-group exercises. Participants will find a desktop or table space useful when they need to take notes during the sessions and exercises. They will also need to be able to see the speakers, the slides or other projections, and the flipchart. The set-up should allow participants to work in small groups and be able to see and hear each other easily. If possible, arrange the room with multiple round tables to facilitate the exercises.

Run-Through

To ensure that the activities go smoothly, facilitators and training coordinators should run through the training to determine the training team members' roles and responsibilities. As mentioned above, facilitators should not plan to read the speaker notes word for word to the participants. Reading directly from the notes throughout the training may not result in an interactive environment. Rather, use the talking points and instructions as guidance on what you can say, which important points and questions to address, and how you should facilitate the exercises.

Keep in mind that the pace of the different training activities is critical. The slide guidance includes suggested timing for each session slide, group exercise, energiser, and break. The sessions, in particular, can become unnecessarily longer if the facilitator does not practise for pacing. Many of the sessions have a large number of slides to be presented in a short amount of time.

Interaction is built into the sessions in an organised manner. The talking points include many questions to engage participants. The facilitator should try to solicit participant responses that are relatively short and to the point. The instructions indicate when an activity requires a longer period for the participants to respond.

To keep the pace of the training and stay on the topic at hand, facilitators may need to respond immediately to participant questions that are easy to address and save other questions for later in the training. Facilitators can create a "parking lot" of questions to respond to later by writing them on a flipchart as a reference.

Training Agenda

DAY 1		
Begin	End	Activity
8:30	9:00	Registration
9:00	10:15	Session 1: Workshop Introduction
10:15	10:30	Pre-Test
10:30	11:00	Tea Break
11:00	12:00	Session 2: What Is Monitoring?
12:00	13:00	Lunch
13:00	13:10	Energiser 1: Rainstorm
13:10	14:10	Session 3: What Is Evaluation?
14:10	15:00	Session 4: Foundations of the M&E Plan
15:00	15:30	Tea Break
15:30	17:15	Session 5: M&E Frameworks
17:15	17:30	Daily Evaluation

Training Agenda

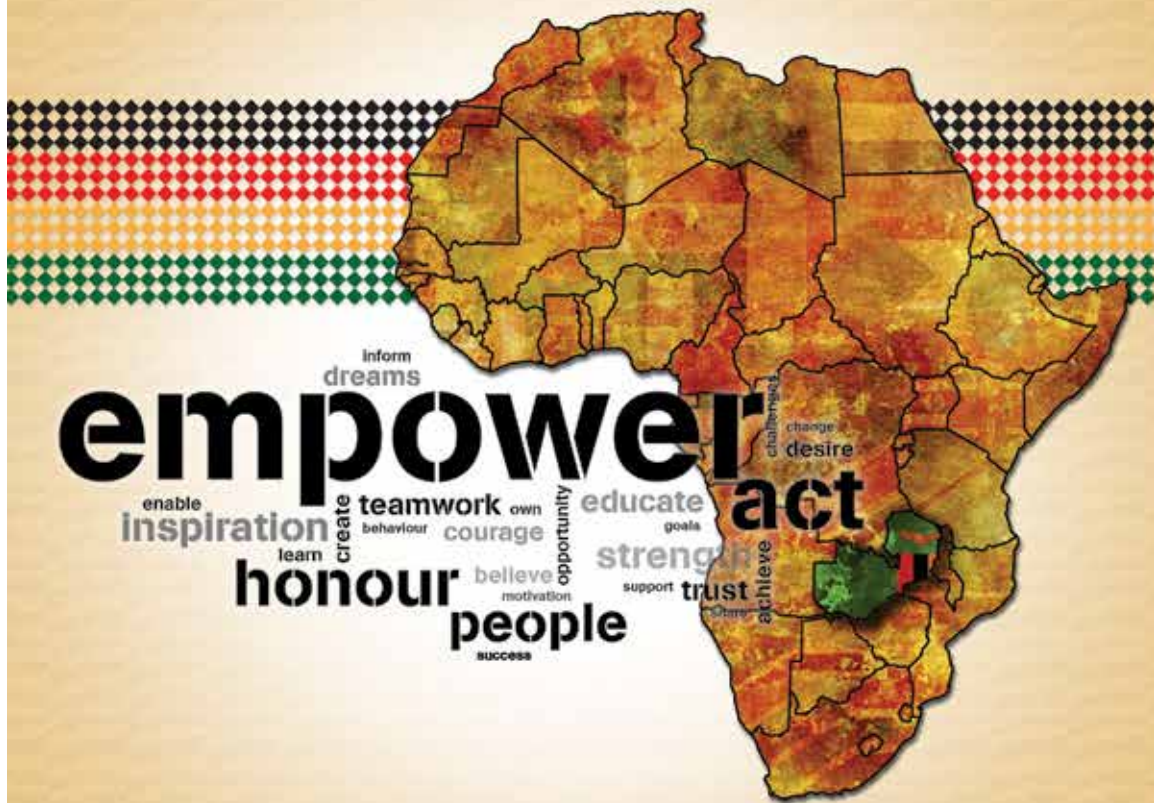
DAY 2		
Begin	End	Activity
8:30	8:40	Reporters
8:40	10:45	Session 5: M&E Frameworks (continued)
10:45	11:15	Tea Break
11:15	12:45	Session 6: Indicators
12:45	13:45	Lunch
13:45	14:00	Energiser 2: Mumble Jumble
14:00	15:45	Session 6: Indicators (continued)
15:45	16:15	Tea Break
16:15	17:15	Session 7: Data Collection
17:15	17:30	Daily Evaluation

Training Agenda

DAY 3		
Begin	End	Activity
8:30	8:40	Reporters
8:40	9:30	Session 7: Data Collection (continued)
9:30	11:00	Session 8: Evaluation Design
11:00	11:30	Tea Break
11:30	13:00	Session 9: Data Presentation
13:00	14:00	Lunch
14:00	14:15	Energiser 3: Kick the Ball
14:15	15:00	Session 10: Data Interpretation
15:00	15:30	Tea Break
15:30	16:20	Session 11: Final Report Out
16:20	16:35	Session 12: Workshop Closing
16:35	17:00	Daily Evaluation and Post-Test

Optional Supplemental Session	
20 minutes	Supplemental Session: Approaches to Analysis

SESSION I



DAY ONE



Administrative Task 1:

Training Registration

Time: 30 minutes

Set-Up:

- Table outside of the training area; and
- Two to three staff members to check in the participants, depending on the number of participants.

Materials:

- Participant booklets
- Blank name tags
- Markers
- Registration list
- Sign-in sheet for each day

Session 1: Workshop Introduction



75 minutes

<p>Session Objectives</p>	<ul style="list-style-type: none"> • Welcome participants and provide an overview of the training • Welcome and introduce any special guests • Address participants' expectations for the training
<p>Methods</p>	<ul style="list-style-type: none"> • Lecture • Group discussion • Exercise • Icebreaker
<p>Materials</p>	<ul style="list-style-type: none"> • Flipchart • Markers

KEY DISCUSSION POINTS

- Note that the goal of the training is to enhance participant's knowledge and skills in monitoring and evaluation of behaviour change communications campaigns. Mention that you understand that some participants may have more experience than others in monitoring and evaluation, and strongly encourage participants who have experience to share their ideas, opinions, and recommendations for carrying out monitoring and evaluation of BCC campaigns. Ask participants to be candid about their expectations for the training and their thoughts on the agenda and methodology for the training. Encourage participants to provide feedback to the training facilitators throughout the training.
- Encourage participants to talk with each other about their backgrounds and objectives for attending the training.



Slide 1.1: Understanding Monitoring and Evaluation

3 minutes

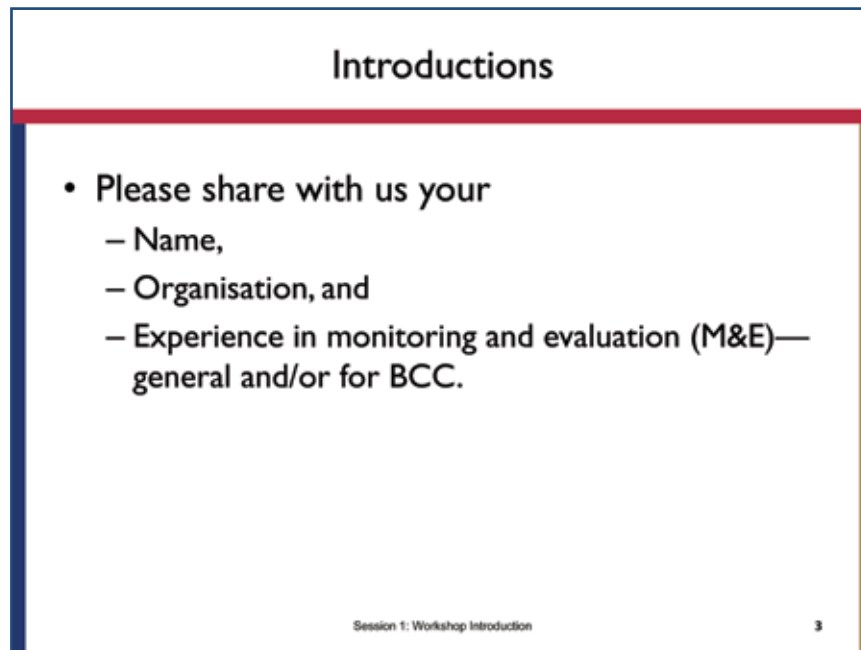
- Welcome participants and any special guests to the training.
- Introduce all of the facilitators and provide a brief description on the sessions that the facilitators will be conducting and their M&E and/or BCC experience.
- Point out that participants will be using the participant booklet for the training. The booklet includes the training slides, materials for the scenario exercises, and examples of Safe Motherhood M&E materials for them to use as a reference after the training.



Slide 1.2: Workshop Introduction

1 minute

- Explain that this morning's introduction section is going to cover a number of different topics and will set the stage for the rest of the workshop to go smoothly. Specifically, during this session the group will be
 - Discussing our expectations of the workshop,
 - Going over the objectives of the workshop,
 - Working together to create some ground rules,
 - Reviewing the full agenda and the methodology we will be using in the workshop, and
 - Taking a pre-test.
- Explain that throughout the training, participants will be asked to offer their experiences with M&E and BCC campaigns, and the training will promote learning from fellow training participants.
- Ask if anyone has any questions before you move on.



Slide 1.3: Introductions

15 minutes

- Explain that you would like participants to introduce themselves and give their name, organisation, and experience in M&E—either in general or for BCC.
- Stress to participants that no one is expected to be experts in M&E for BCC. Highlight that the group is a mix of programme and M&E staff because we understand that they need to work together closely to plan for measuring campaign results to inform the campaign implementation and improvements—and to make sure that their campaigns are successfully meeting their set objectives.
- Explain that the training will focus on discussing M&E methods and concepts that can be used specifically for BCC campaigns, and that the training will not cover statistical analysis methods.
- Explain that throughout the training, participants will be asked to offer their experiences with M&E and BCC campaigns, and the training will promote learning from fellow training participants.
- Go around the room and ask each participant to tell the group his or her name, organisation, and experience in M&E for BCC and/or in general.

Expectations

- What do you **HOPE** this learning experience will be like?
- What knowledge or skills do you **WANT** to apply in your daily job as a result of this workshop?
- What **WORRIES** you about the learning process?

Session 1: Workshop Introduction 4

Slide 1.4: Expectations

25 minutes

- Ask the group to form small groups of three participants each to discuss the three questions on the slide.
- Hand out a piece of flipchart paper and markers to each small group. Allow 5 minutes for each group to write its lists and select a person to present each of the lists.
- Allow 15 minutes for each group to present its lists and to respond to any questions or concerns.
 - Be sure to reflect back/summarise what you are hearing; acknowledge topics that will be covered. Make note of topics that may NOT be covered in the workshop, but hold those for the end.
 - Address participants' concerns.

The slide is titled "Training Objectives" in a bold, black font at the top center. Below the title is a thick red horizontal bar. The main content is a bulleted list of objectives. The first bullet point is a bolded statement: "After attending this workshop, participants will be able to". This is followed by seven sub-bullets, each starting with a minus sign. At the bottom of the slide, there is a small footer that reads "Session 1: Workshop Introduction" on the left and the number "5" on the right.

Training Objectives

- **After attending this workshop, participants will be able to**
 - Explain the role of M&E for BCC and how it is different from M&E for health service delivery;
 - Create M&E frameworks;
 - Choose M&E indicators;
 - Select an appropriate evaluation design, data sources, and collection methods;
 - Design an M&E plan;
 - Identify effective presentation and interpretation practices; and
 - Make recommendations for campaign revisions.

Session 1: Workshop Introduction 5

Slide 1.5: Training Objectives

2 minutes

- Ask for a volunteer to read off the list of workshop objectives and make comparisons or connections to participant expectations, hopes, and worries about the workshop.
- Note that in designing this workshop we had to make some tough decisions on what to include and what to leave out, and that this workshop will not cover statistical analysis methods. That is another class in and of itself.

Agenda and Methodology

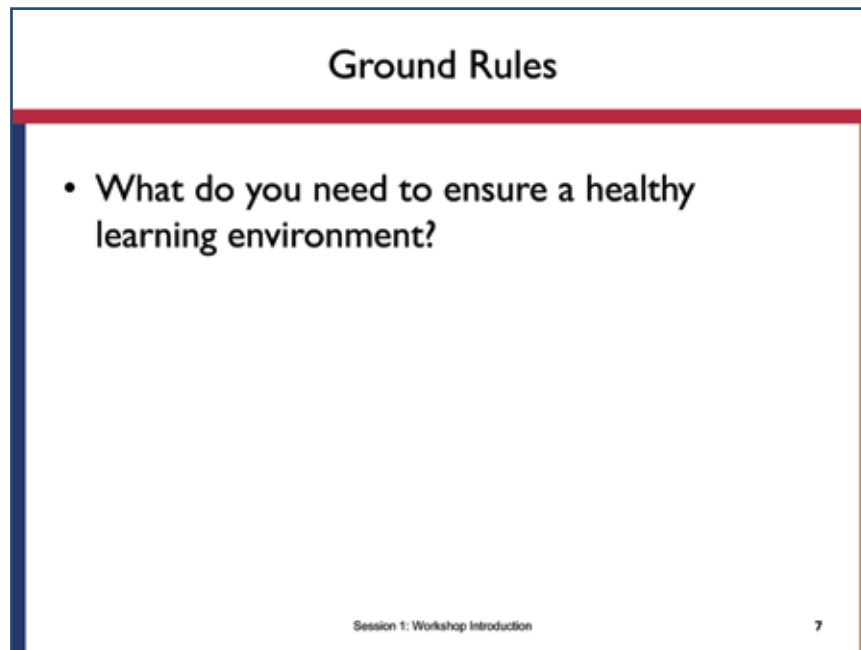
- **Structure**
 - Sessions
 - Tea breaks and lunch
 - Energisers
- **Learning process**
 - Presentations
 - Discussions and participatory exercises
 - Daily reporting
- **Feedback**
 - Pre- and post-tests
 - Daily evaluations
 - Guided discussion

Session 1: Workshop Introduction 6

Slide 1.6: Agenda and Methodology

4 minutes

- Explain that the training will consist of three types of activities, including
 - Sessions—These will be where we go through the materials included in the booklet and discuss the content. We will do a lot of discussing and sharing of experiences during this time.
 - Tea breaks and lunch—Each day we'll have a lunch break and a morning and afternoon tea break.
 - Energisers—These are fun activities to get your energy up and ready for learning.
- Explain that the sessions are where we will concentrate on content. Each of these sessions will be broken up into the following:
 - Presentations—This is when we, as facilitators, get to present content to you and ask questions to get you thinking.
 - Group discussions and participatory exercises—This is when participants will really get to share their experience and knowledge, and practise applying the content in the lectures. Some exercises will involve using a scenario of an HIV/AIDS campaign to work through developing portions of an M&E plan.
 - Daily reporting—Each morning, a team will give an overview of the previous day's highlights.
- Explain that each participant will also complete
 - Pre- and post-tests to see how his or her understanding of M&E for BCC campaigns may have changed as a result of the workshop, and
 - Daily evaluations to provide feedback that will help the team address any concerns or requests for the subsequent training days.
- Explain that at the end of the training workshop we will have a guided discussion whereby participants will be able to provide further feedback on how the workshop can be improved.



Slide 1.7: Ground Rules

10 minutes

- Explain that establishing ground rules together will help make sure the training goes smoothly.
- Ask participants:
 - What ground rules would you like to have for this training session?
 - What do you need to ensure a healthy learning environment?
- Write the participant responses on a flipchart.
- Consider adding the following rules, if not mentioned by the participants or if the participants have trouble thinking of some rules:
 - Do not have side conversations during the sessions. Not only will we miss out on the wonderful things you have to say, but side conversations make it difficult for others to hear.
 - Be respectful of others' opinions and experience. Your experience or opinions may be different, but that can be discussed respectfully.
 - Try to stick to the times set in the agenda.
 - Start on time.
 - Participate.
 - Turn off all mobile phones.

Icebreaker

- Identify the 10 things you have in common with every other person in your group that have nothing to do with work.
- Do not include body parts or clothing (we all have legs, we all have arms, we all wear socks...) in your 10 things.

Session 1: Workshop Introduction 8

Slide 1.8: Icebreaker

15 minutes

- Explain that before moving to the next session, the group will do an icebreaker to get to know each other a little better.
- Divide the participants into groups of four or five, depending on which number the total number of participants is more easily divided into, by having them count off. For example, “Starting with [Name], let’s go around the room counting off by five. [Name], you would be ‘one.’ [Turning to the next person] You would be ‘two,’” etc.
- Tell the groups to gather by numbers, once the counting off is finished (e.g., “All the Ones over here. All the Twos over there ...”).
- Tell the newly formed groups that their assignment is to find 10 things they have in common with every other person in the group and that have nothing to do with work.
- Explain that their answers cannot include body parts or clothing (e.g., we all have legs, we all have arms, we all wear shoes, we all wear pants).
- Tell the groups that one person must take notes and be ready to present the group’s list to the rest of the participants.
- Allow the groups to brainstorm for 10 minutes, then tell them that the lists they have created are perfect, no matter how many items they have.
- Ask for a volunteer to read his or her group’s list of things in common first. Then, ask each group to share its list with everyone.
- Explain that we are now at the end of Session 1 and that we will now take the pre-test.

Tea Break

Administrative Task 2:



Training Pre-Test

Time: 15 minutes

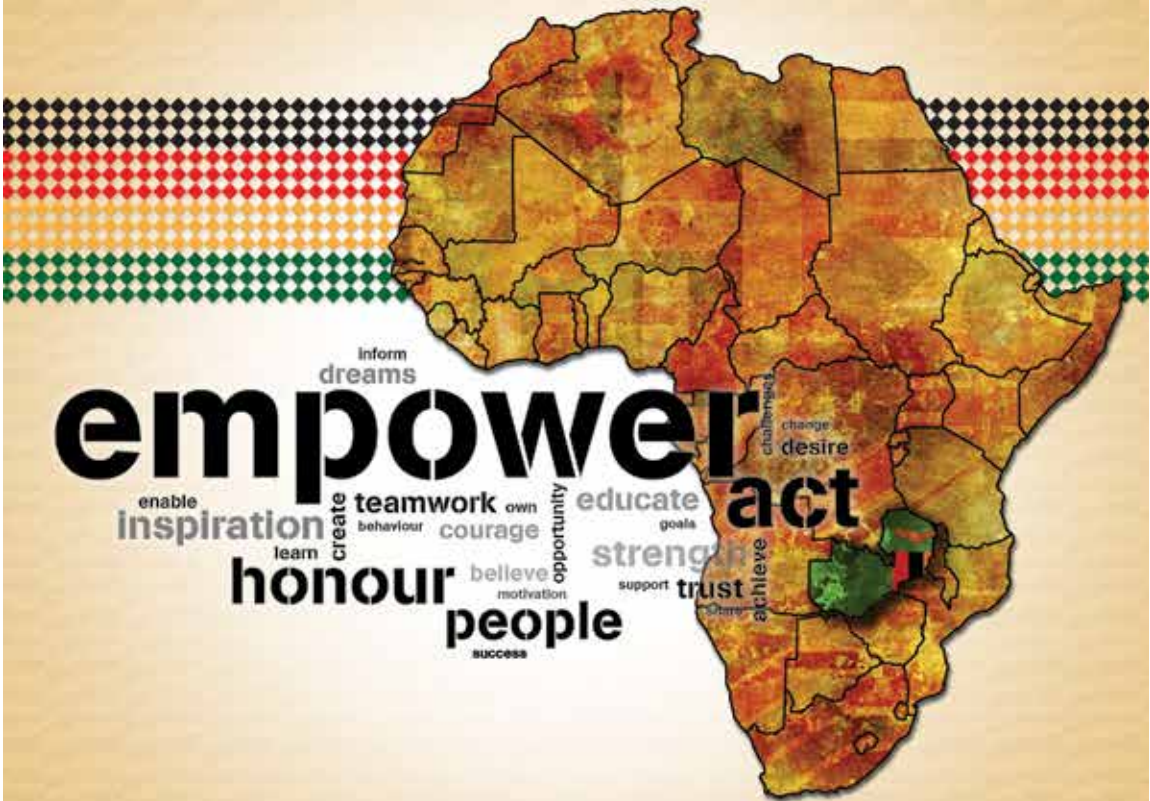
Process:

1. Explain that the purpose of the pre-test is to measure participant knowledge of monitoring and evaluation before the training, and their responses will be compared to their responses to the post-test. Explain that the evaluation team will compare the responses to assess the change in participants' knowledge as a result of the training.
2. Distribute the pre-test forms.
3. Ask participants to label the tests with the last four digits of their National Registration card.
4. Tell participants they will have 10 minutes to complete the form.
5. Remind participants not to write their names on the form.
6. Ask participants to turn their forms face down when completed.
7. Collect all completed forms and store them to review later.

Materials:

- Pre-test forms
- Pens or pencils

SESSION 2



Session 2: What Is Monitoring?



60 minutes

<p>Session Objectives</p>	<ul style="list-style-type: none"> • Define monitoring • Explain what monitoring can measure • Explain what monitoring cannot measure • Discuss when monitoring takes place
<p>Methods</p>	<ul style="list-style-type: none"> • Lecture • Group discussion • Scenario exercise
<p>Materials</p>	<ul style="list-style-type: none"> • Flipchart • Markers

KEY DISCUSSION POINTS

- Explain that this session is intended to provide a general overview of monitoring and to begin to discuss how monitoring of a BCC campaign is different than of health service delivery interventions or projects. Mention that subsequent sessions will provide more detail on how to carry out monitoring of BCC campaigns.



Slide 2.1: What Is Monitoring?

1 minute

- Explain that this session is about discussing the concept of monitoring for BCC campaigns.
- Mention that some of these concepts might be familiar to some participants, but new to other participants.

Objectives

- Participants will be able to
 - Define monitoring,
 - Explain what monitoring can measure,
 - Explain what monitoring cannot measure, and
 - Discuss when monitoring takes place.

Session 2: What Is Monitoring? 2

Slide 2.2: Objectives

2 minutes

- Read each of the objectives.
- Ask participants:
 - Does anyone have any questions before we begin with the session?

Your Perspective

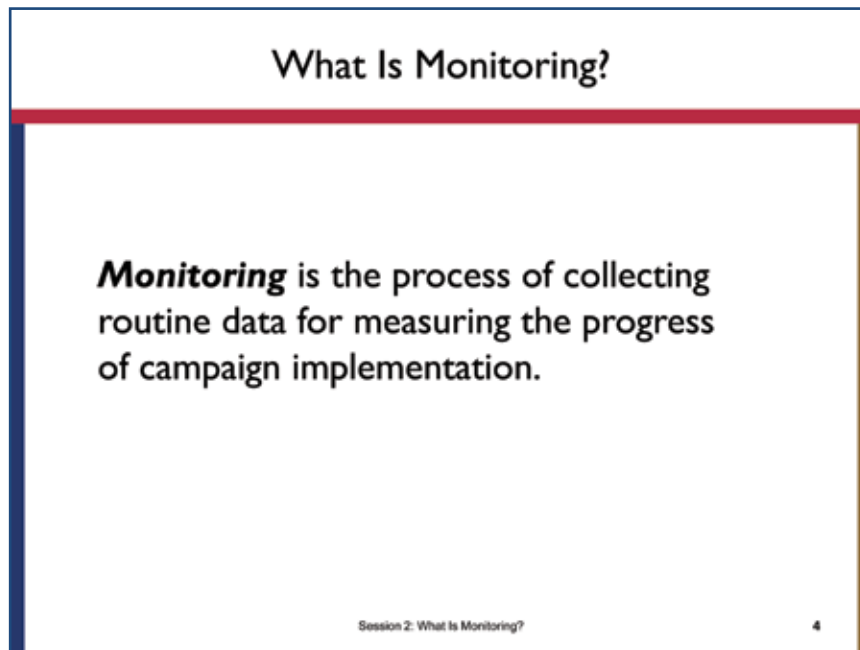
- What is monitoring?
- What does it mean to monitor a BCC campaign?
- How is monitoring different for a BCC campaign than for a health services delivery project?

Session 2: What Is Monitoring? 3

Slide 2.3: Your Perspective

10 minutes

- Ask participants the following questions:
 - What is monitoring?
 - What does it mean to monitor a BCC campaign?
 - How is monitoring different for a BCC campaign than for a health services delivery project?
- Explain that monitoring a BCC campaign can be much more complex than monitoring health service delivery projects—and that this training will provide some guidance on how to monitor a BCC campaign.



Session 2.4: What Is Monitoring?

1 minute

- Ask a participant to read the slide.
- Explain that monitoring is used to track progress in campaign implementation over time. The purpose of monitoring is to provide stakeholders with the information they need for managing their campaign and, as necessary, make course corrections to the campaign over time.

Monitoring

- Is a continuous, systematic process;
- Involves collecting and analysing information throughout the campaign implementation; and
- Can be used to determine if a campaign is being implemented according to plan and whether it needs to be changed.

Session 2: What is Monitoring? 5

Slide 2.5: Monitoring

5 minutes

- Explain that
 - Monitoring is a continual, systematic process of collecting and analysing information to determine if a campaign is being implemented according to plan and whether it needs to be changed.
 - If monitoring is done well, you can use that information to refine the campaign’s activities and increase the chances of making measurable changes.
 - Monitoring data helps you avoid coming to the end of a campaign and then finding out that your campaign did not work or was not implemented as planned.
- Ask participants the following questions:
 - Have you ever used the term “process evaluation”?
 - How is it different from monitoring?

Monitoring Looks at Process

- How well has the programme been implemented?
- How much does implementation vary from site to site?
- Did the programme reach the intended people? At what cost?

Session 2: What Is Monitoring? 6

Slide 2.6: Monitoring Looks at Process

3 minutes

- Explain that monitoring is sometimes referred to as “process evaluation” because it focuses on the implementation process; it asks the following key questions:
 - How well has the programme been implemented?
 - How much does implementation vary from site to site?
 - Did the programme benefit the intended people? At what cost?
- Ask participants:
 - What types of things do you monitor or measure in a BCC campaign?

What Monitoring Measures

- **Monitoring measures**
 - *What did the project do?*
 - *How much was accomplished?*
- **Monitoring measures activities you have done.**

Session 2: What is Monitoring? 7

Slide 2.7: What Monitoring Measures

2 minutes

- Explain that monitoring measures activities your project or campaign has implemented—what and how much was accomplished.
- Note that monitoring looks at the campaign’s implementation and how the related activities are working. For example, how many people have been reached with campaign messages or activities?

What Monitoring Measures (cont.)

- Monitoring helps you measure how well a campaign is being delivered through tracking items or activities, such as
 - Materials distribution,
 - Amount of media time bought,
 - Number of peer educators trained in counselling, and
 - Number of newspaper inserts developed on how to correctly use a condom.

Session 2: What Is Monitoring? 8

Slide 2.8: What Monitoring Measures (continued)

3 minutes

- Explain that monitoring helps you assess how well a campaign is being delivered.
 - It does that through tracking activities such as materials distribution or amount of media time bought.
- Ask participants:
 - What does monitoring of BCC campaigns NOT measure?

What Monitoring *Doesn't* Measure

Monitoring is good at summarising what has been done. BUT

- Monitoring numbers are a very weak measure of the campaign's effects.
- Monitoring measures *programme activities*, not the *impact or effect of those activities*.

Session 2: What is Monitoring? 9

Slide 2.9: What Monitoring Doesn't Measure

2 minutes

- Explain that in contrast to evaluation, monitoring does not capture campaign effects and is not meaningful from an impact or causal point of view. It is not going to tell you how your project has changed the health status of the population.
- Explain that monitoring is good at summarising what has been done, but those numbers are a very weak measure of the campaign's effects. It measures programme activities, not the impact or effect of those activities.

Monitoring Tells a Story

- Monitoring tells the story of what you have done.
- It can help you
 - Know where to implement changes in your campaign,
 - Formulate lessons learned for your project or other projects, and
 - Better understand your evaluation results.

Session 2: What Is Monitoring? 10

Slide 2.10: Monitoring Tells a Story

1 minute

- Explain that monitoring tells the story of what you have done and can help you identify where to make changes in the campaign.
- Explain that monitoring data is also helpful for better understanding the evaluation results of your campaign—why certain things may have worked and others did not based on how the campaign was implemented.

Scenario Exercise: Monitoring Brainstorm

- Review the HIV/AIDS campaign plan.
- Identify some things you would want to monitor.

Session 2: What is Monitoring? 11

Slide 2.11: Scenario Exercise: Monitoring Brainstorm

30 minutes

- Ask participants to look in their booklets for the example of an HIV/AIDS campaign plan on page 157. This sample HIV campaign focuses on reducing multiple concurrent partnerships and increasing the uptake of prevention of mother-to-child transmission (PMTCT) services in Zambia. It includes a summary of the campaign strategy and part of the implementation plan.
- Explain that participants will use this scenario throughout the training to do some hands-on work with the concepts presented in the training.
- Explain that the first exercise will consist of the participant reading through the campaign plan, and then the group will brainstorm on what they would monitor for this campaign. Explain that the brainstorm will be the first step in thinking about what would need to be monitored—and that coming up with a more detailed plan for choosing indicators and data collection methods and sources will happen later in the training.
- Allow participants 20 minutes to read through the campaign plan.
- Ask participants:
 - Realising this is your first time reviewing the campaign plan, what do you think are some factors that would be important to monitor for the multiple concurrent partnership (MCP) component of the campaign? And for the PMTCT component?
- Write the participant responses on a flipchart. Summarise the responses at the end of the brainstorm and add factors that the participants might have missed. Write those missing factors on the flipchart.

Lunch



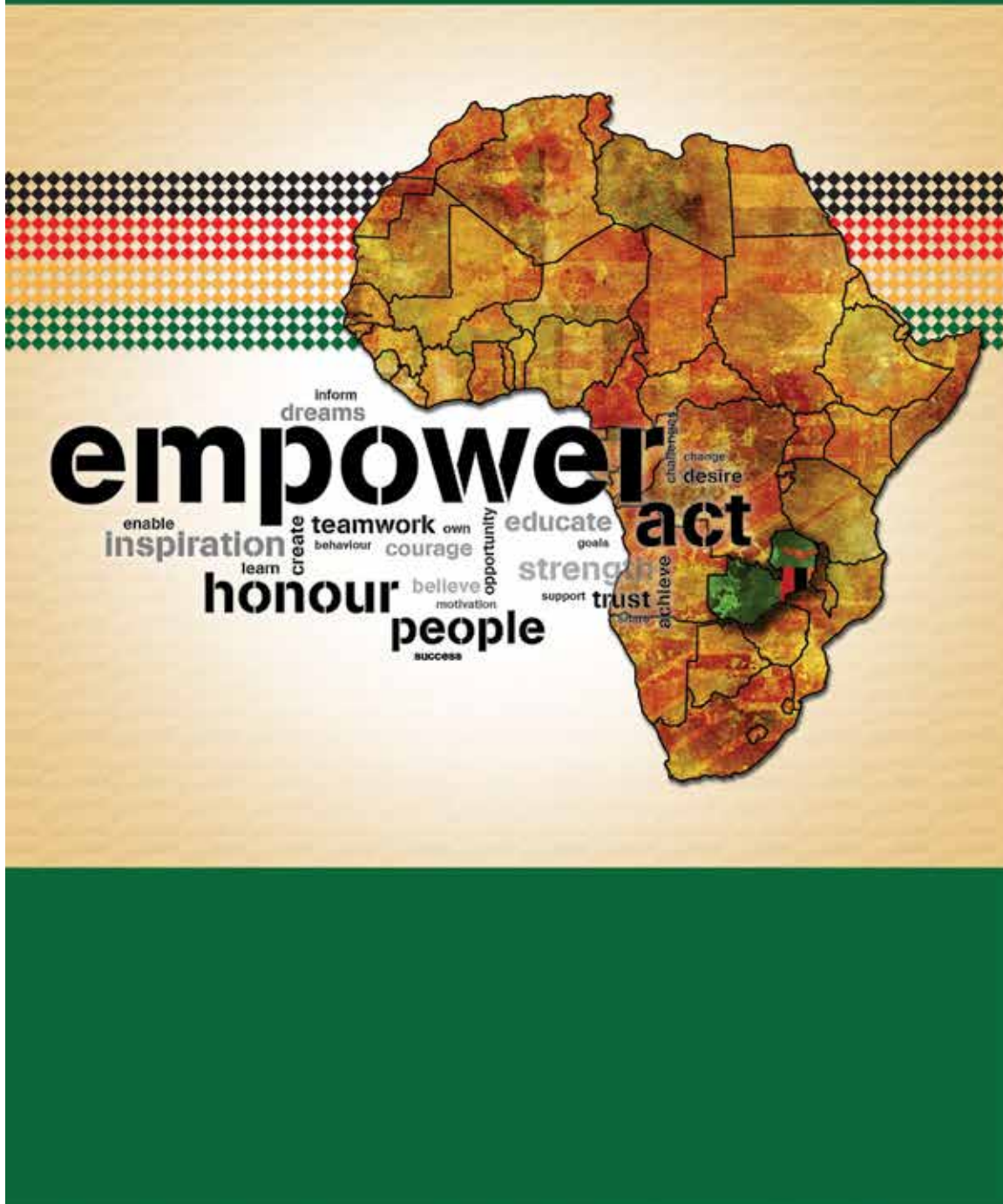
Energiser 1: Rainstorm

10 minutes



- Arrange participants so they are seated in a circle.
- Tell participants that there will be a rainstorm passing through, and they are going to create it.
 - Ask everyone to sit quietly in the circle and to wait until everyone is silent. Tell people that you will do an action, and the person to your right should copy it. Then the person to his or her right will copy it, and so on until everyone around the circle is doing the same action.
 - Rub your palms together to create the sound of rain. The person to your right should make this sound, and then the next person until everyone in the group is making the same sound.
 - Once everyone is rubbing palms, then make the rain sound louder by snapping your fingers, and that sound in turn is passed around the circle.
 - Once the snapping is passed around the circle, clap both hands together, and that sound is passed around the circle to create a rainstorm.
 - Slap your thighs, and send that movement around the circle.
 - Stomp your feet; the rain becomes a hurricane.
 - To indicate the storm is stopping, reverse the order: thigh slapping, then hand clapping, finger snapping, palm rubbing, and ending in silence.

SESSION 3



Session 3: What Is Evaluation?



60 minutes

<p>Session Objectives</p>	<ul style="list-style-type: none"> • Define evaluation • Explain what evaluations can do • Compare and contrast outcome and impact evaluations • Explain why outcome, rather than impact, evaluations are used for BCC
<p>Methods</p>	<ul style="list-style-type: none"> • Lecture • Group discussion • Scenario exercise
<p>Materials</p>	<ul style="list-style-type: none"> • Flipchart • Markers

KEY DISCUSSION POINTS

- Explain that this session is intended to provide a broad overview of what evaluation entails and how it can be used for assessing the progress and/or impact of a BCC campaign. Mention that subsequent sessions will provide more detail on evaluation designs for BCC campaigns.
- Highlight that we will be focusing on distinguishing between outcome and impact evaluations. Stress that most often for BCC campaigns we use outcome evaluations to assess the effect of the campaign on the target population’s knowledge, beliefs, and behaviours. This is because impact evaluations are very hard to conduct for BCC campaigns.



Slide 3.1: What Is Evaluation?

1 minute

- Explain that this session is about discussing the concept of evaluation for BCC campaigns.
- Mention that some of these concepts might be familiar to some participants, but new to others.

Objectives

- **Participants will be able to**
 - Define evaluation;
 - Explain what evaluations can do;
 - Compare and contrast outcome and impact evaluations; and
 - Explain why outcome, rather than impact, evaluations are used for BCC.

Session 3: What Is Evaluation? 2

Slide 3.2: Objectives

2 minutes

- Ask for a volunteer to read each of the objectives.
- Ask participants:
 - Does anyone have any questions before we begin with the session?
 - How would you define evaluation?

Definition

- Evaluation measures how well the campaign or programme activities have met expected objectives.
- Depending on the design, evaluation can also measure the extent to which changes in desired outcomes can be attributed to the campaign or intervention.

Session 3: What is Evaluation? 3

Slide 3.3: Definition

3 minutes

- Explain that evaluation measures how well the campaign or programme activities have met expected objectives.
- Note that, depending on the design campaign, planners can also measure the extent to which changes in desired outcomes (e.g., increase in the percentage of children under age 5 sleeping under an insecticide-treated net or increase in the percentage of children who are exclusively breastfed for 6 months) can be attributed to the campaign or intervention.
- Ask participants:
 - What are the main types of evaluation?

Main Evaluation Types

- **Outcome**
 - Used most frequently for BCC campaigns, and
 - Measures the result or influence of your campaign on the behaviour you are trying to change.
- **Impact**
 - Used rarely, if ever, to evaluate BCC campaigns; and
 - Measures change in health status (mortality or incidence rates).

Session 3: What Is Evaluation? 4

Slide 3.4: Main Evaluation Types

3 minutes

- Explain that there are two main evaluation types for BCC campaigns, outcome and/or impact evaluations.
- Explain that outcome evaluations are used most frequently for BCC campaigns.
- Note that an outcome evaluation measures the effect of your campaign on the behaviour you are trying to change with your campaign or programme.
- Explain that impact evaluations are rarely, if ever, used to evaluate BCC campaigns, since impact evaluations measure changes in health status (mortality or incidence rates). Any change in health status would most likely not be detectable until long after a BCC campaign ends.
- Ask participants:
 - What types of factors does an outcome evaluation measure?

Outcome Evaluations

- Involve measuring changes in the target population on aspects the campaign was designed to influence, such as
 - Attitude
 - Behaviour
 - Policy change
- Include both intermediate and long-term outcomes.

Session 3: What is Evaluation? 5

Slide 3.5: Outcome Evaluations

4 minutes

- Explain that outcome evaluations involve measuring changes in the target population on aspects that the campaign was designed to influence.
- Explain that common factors that evaluation would measure would include the target population's attitudes and behaviours, or policy changes on different levels.
- Explain that outcome evaluation measures both effect on intermediate and long-term outcome results.
- Ask participants:
 - Does anyone have any examples of what you would want to measure for an outcome evaluation of a BCC campaign?

Outcome Evaluation Example

- In a malaria campaign evaluation, you may want to look at changes in attitudes and knowledge around whether intermittent preventive treatment (IPT) is safe to take during pregnancy.
- In an HIV campaign evaluation, you may want to look at changes in the proportion of people who have reduced the number of partners they have.

Session 3: What Is Evaluation? 6

Slide 3.6: Outcome Evaluation Example

2 minutes

- Explain that these are examples of the types of things an outcome evaluation can measure.
- Note that if part of your campaign is to reduce malaria in pregnancy, one of the things you may want to look at is whether there is a change in attitudes and knowledge around whether intermittent preventive treatment is safe to take during pregnancy.
- Note that, in an HIV campaign evaluation, you may want to look at changes in the proportion of people who have reduced the number of partners they have.

Scenario: Evaluation Brainstorm

- **What factors would you measure in an evaluation for the HIV/AIDS campaign?**

Session 3: What is Evaluation? 7

Slide 3.7: Scenario Exercise: Outcome Evaluation Brainstorm 25 minutes

- Explain to participants that this exercise will consist of them taking another look at the campaign plan and brainstorming with the group about which factors they would measure for an outcome evaluation.
- Allow 5 minutes for the participants to review the campaign plan again.
- Ask participants:
 - What factors should you measure in an outcome evaluation for this HIV/AIDS campaign for the MCP component? And for the mother-to-child transmission component?
- Write the participant responses on a flipchart. Summarise the responses at the end of the brainstorm and add factors that the participants might have missed. Write those missing factors on the flipchart.
- Ask participants to think about what we just discussed about outcome and impact evaluations and then discuss the following:
 - What is the difference between the two types of evaluation?
 - What factors do each of the types of evaluation measure?
 - What changes are you looking for in each evaluation?
- Write responses on a flipchart. Create two columns to organise the responses—one for outcome and one for impact.

Outcome vs. Impact

Outcome Evaluation	Impact Evaluation
<ul style="list-style-type: none">• Assesses changes as a result of campaign strategies and activities.<ul style="list-style-type: none">✓ Have knowledge, attitudes, or perceived social norms changed?✓ Has there been any behaviour change?✓ Have any policies changed?	<ul style="list-style-type: none">• Assesses whether the behaviour resulted in its intended health outcomes.<ul style="list-style-type: none">✓ Has health status changed (e.g., lower maternal mortality, lower incidence of malaria)?

Session 3: What Is Evaluation? 8

Slide 3.8: Outcome vs. Impact

5 minutes

- Review the differences and compare this chart to the one created by the participants.

Your Perspective

- Have any of you worked on an evaluation for a BCC campaign?
 - What are some of the factors you evaluated?
- Thinking of the latest BCC campaign you worked on, what would you want to evaluate?
- What type of planning or preparations did you do for your evaluation?

Session 3: What is Evaluation? 9

Slide 3.9: Your Perspective

5 minutes

- Note to facilitator: In a BCC campaign, you will be measuring BEHAVIOURS (such as an increase in the number of people wearing condoms), not health outcomes, such as a decrease in the incidence of HIV or maternal mortality.
- Ask participants:
 - Have any of you worked on an evaluation for a BCC campaign?
 - What are some of the factors you evaluated?
 - When you think of the latest BCC campaign you have worked on, what would you want to evaluate?
 - What type of planning or preparations did you do for your evaluation?
- Ask participants:
 - What did you find evaluations were able to do for your project?
 - How did it change how you communicated about your project to your donor or how you planned follow-on projects?

What Can Evaluations Do?

- **Evaluations help to objectively assess**
 - The extent to which the BCC campaign is having or has had an influence on the factors you want to change,
 - In what areas it is effective, and
 - Where corrections or improvements need to be considered.
- **Evaluations allow campaign managers to**
 - Meet organisational reporting and other requirements, and
 - Convince donors that their investments have been worthwhile or that recommendations to the campaign strategy should be considered.

Session 3: What is Evaluation? 10

Slide 3.10: What Can Evaluations Do?

4 minutes

- Explain that evaluations help to objectively assess certain things, such as
 - The extent to which the campaign is having or has had an influence on the behaviour or policy you are trying to change,
 - In what areas it is effective, and
 - Where corrections need to be considered.
- Explain that evaluations also help campaign managers meet organisational reporting and other requirements and convince donors that their investments have been worthwhile or that alternative approaches should be considered.
- Ask if anyone else has suggestions about other things that evaluations can do.
- Ask participants:
 - When do evaluations normally happen during the life of a BCC campaign?

When Does Evaluation Happen?

- Evaluations usually happen at the end of a campaign or project, although they should be planned from the beginning.
- Data collection at the start of a campaign (to provide a baseline), and again at the end, is recommended to allow comparisons.
- Depending on the length of the campaign, funders may also want a mid-term evaluation.
- Advanced planning allows you to choose the best design for your campaign evaluation.

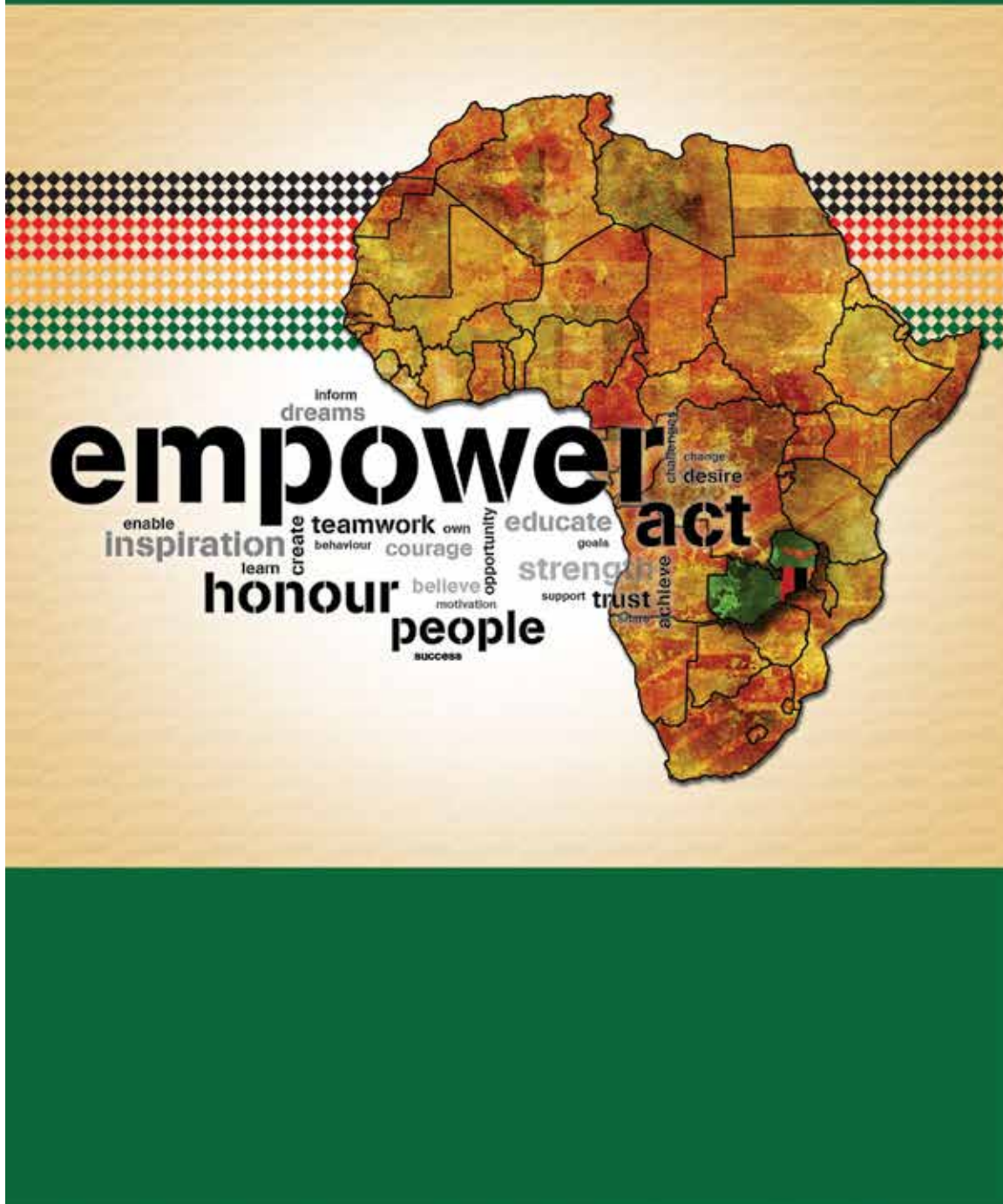
Session 3: What is Evaluation? 11

Slide 3.11: When Does Evaluation Happen?

2 minutes

- Explain that, although evaluations usually happen at the end of a campaign or project, managers should be planning them earlier.
- Explain that data collection at the start of a campaign (to provide a baseline) and again at the end is helpful so that you can look at changes over time. If you are going to have a baseline so you can compare data before and after your campaign, you will need to conduct that baseline data collection before your campaign officially begins.
- Explain that projects commonly do evaluations at the mid-point. This is more common in projects or campaigns that last over several years. Doing a mid-term evaluation allows managers to assess whether things are going as planned or whether changes should be made in the campaign approach.
- Stress that advanced planning allows you to choose the best evaluation design for your campaign, rather than settling for whatever design the data you have will allow you to do.

SESSION 4



Session 4: Foundations of the M&E Plan



50 minutes

Session Objectives	<ul style="list-style-type: none"> • Describe the functions of an M&E plan • Identify the main elements of an M&E plan
Methods	<ul style="list-style-type: none"> • Lecture • Group discussion
Materials	<ul style="list-style-type: none"> • Flipchart • Markers

KEY DISCUSSION POINTS

- Explain that an M&E plan really serves to guide M&E activities over the life of the BCC campaign.
- Note that the session will cover the essential elements or critical pieces of information that should be included in an M&E plan; however, it is important to note that there is no standard format one must follow for all M&E plans. This is intended to serve as a guide as to what information should always be included in the plan.
- Highlight the importance of developing the M&E plan for the BCC campaign in collaboration with programme staff. This will help to ensure that the M&E plan is aligned to the BCC campaign plan and strategy. Much of the information that is in the BCC campaign strategy and plan inform the development of the M&E plan.
- Stress that an M&E plan is a living document and therefore must be updated whenever there are changes to the BCC campaign strategy or plan.



Slide 4.1: Foundations of the M&E Plan

1 minute

- Explain that this session will introduce the key components of an M&E plan and that the subsequent sessions will go into more detail about each of the components.

Objectives

- Describe the functions of an M&E plan, and
- Identify the main elements of an M&E plan.

Session 4: Foundations of the M&E Plan 2

Slide 4.2: Objectives

1 minute

- Read each of the objectives for the session.
- Ask participants:
 - Does anyone have any questions before we begin with the session?

The M&E Plan

- Every campaign should have an M&E plan.
- M&E plans should be created during the design phase of a programme and can be organised in a variety of ways.
- The M&E plan should be closely tied to the programme plan, and both M&E staff and programme staff should be familiar with both documents.

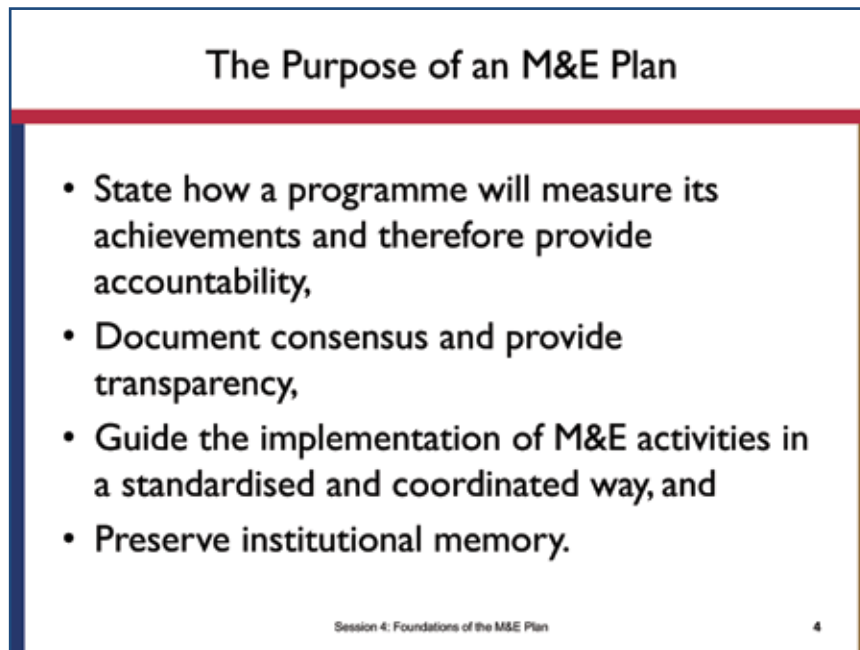
Session 4: Foundations of the M&E Plan

3

Slide 4.3: The M&E Plan

4 minutes

- Stress that every campaign should have an M&E plan and that it should be created during the design phase of the campaign.
- Stress that the M&E plan should be closely tied to the campaign plan and that both M&E staff and programme staff should work together to make sure that the M&E plan accurately reflects the campaign plan.
- Ask participants:
 - Why is an M&E plan helpful?
 - What is the purpose of an M&E plan?



Slide 4.4: The Purpose of an M&E Plan

5 minutes

- Explain that an M&E plan shows how a campaign will measure its achievements. The plan documents agreed-upon measures to be used for assessing whether the campaign is doing what it is supposed to be doing and whether in the end it accomplished what it was supposed to accomplish.
- Explain that the M&E plan should be developed with input from programme staff and other stakeholders involved in the campaign. The plan serves to document the consensus reached among all involved in the campaign, and therefore provides transparency, ownership, and accountability.
- Explain that an M&E plan is the project’s road map for M&E activities. Everyone should be able to see what is needed and when, as well as the standard by which the campaign will be judged.
- Explain that the plan can help document campaign activities and decisions.
- Ask participants:
 - What type of information is normally included in an M&E plan?
- Write the responses on a flipchart.

Information the Plan Includes

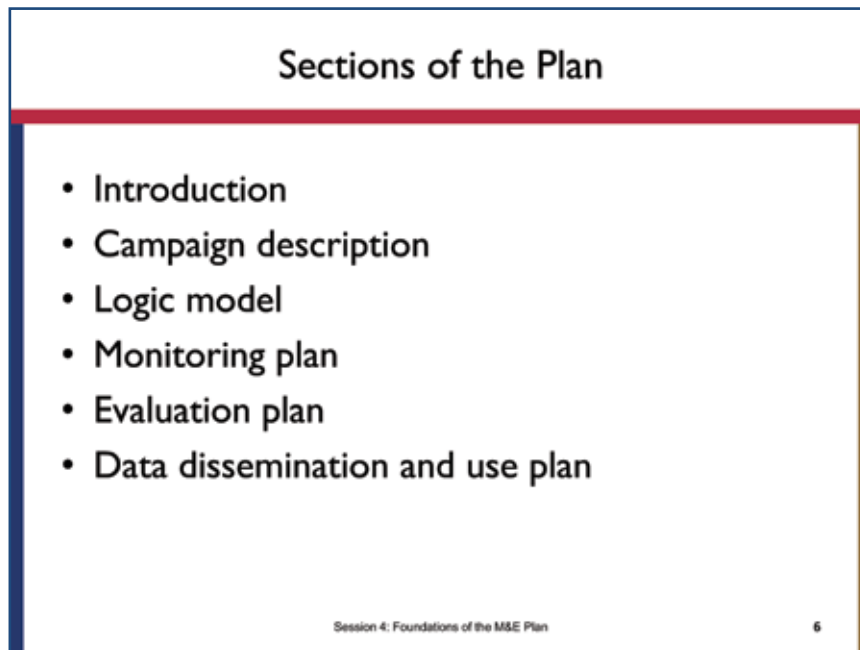
- Purpose of the M&E plan,
- Campaign goal and objectives,
- Campaign interventions,
- Procedures to assess whether objectives are met,
- Data needed,
- Data collection and analysis,
- Assessment of data quality,
- Ways in which the data will be used, and
- Accountability of the programme to stakeholders.

Session 4: Foundations of the M&E Plan 5

Slide 4.5: Information the Plan Includes

3 minutes

- Explain that this document details a programme’s objectives, describes the interventions developed to achieve these objectives, and describes the M&E procedures that will be implemented to determine whether the objectives are met. The plan shows how the expected results of a programme relate to its goals and objectives, describes the data needed and how these data will be collected and analysed, explains how this information will be used and which resources will be needed, and describes how the programme will be accountable to stakeholders.
- Compare these responses with the participant responses to the previous question.
- Ask participants:
 - What are the main sections of an M&E plan?
- Write the responses on a flipchart.



Slide 4.6: Sections of the Plan

3 minutes

- Review the list on this slide and compare it with the participant responses to the previous question.
- Explain that this is one way in which you can organise or outline the plan. We're going to talk a bit more in detail in this session about the introduction and campaign description. We will cover the remaining sections in more detail in other sessions. But, because these first two sections come from the campaign plan, we want to discuss them upfront.
- Ask participants:
 - What type of information should be included in the introduction section?

The Introduction

- **Should include:**
 - The purpose of the M&E plan,
 - Information about the purpose of the campaign, and
 - Information about the stakeholders and the campaign context.

Session 4: Foundations of the M&E Plan 7

Slide 4.7: The Introduction

3 minutes

- Explain that the introduction to the M&E plan should clearly explain the purpose and/or function(s) of the M&E plan, provide information about the purpose of the campaign (e.g., what problem is the campaign addressing?) and background information on the context within which it is being implemented, and include a brief overview of who the stakeholders are and to what extent is their interest, commitment, and participation in the campaign.
- Ask participants:
 - What type of information should be included in the campaign description?

Campaign Description

- The contents of this section should come from your campaign plan:
 - Problem statement,
 - Conceptual framework (preferable),
 - Campaign goal,
 - Campaign objectives, and
 - Intervention descriptions (who, what, when, where, and how).

Session 4: Foundations of the M&E Plan 8

Slide 4.8: Campaign Description

4 minutes

- Explain that the contents of this section should come from your campaign plan and should always contain the problem statement (what health/behavioural problem the campaign is intended to address); campaign goal and objectives; and the description of the intervention, including timeframe, target audience, and way in which it would be implemented.
- Explain that a conceptual framework is preferable but not necessary. The training will go into more detail about this component and its benefit in the M&E Frameworks session.
- Ask participants:
 - How would you describe a problem statement?

Campaign Description (cont.)

Problem Statement

- Identifies the specific problem to be addressed, and
- Should be concise, with information about
 - The situation that needs changing
 - Who it affects
 - Its causes
 - Its magnitude
 - Its impact on society

Session 4: Foundations of the M&E Plan

9

Slide 4.9: Campaign Description (continued) [Problem Statement]

2 minutes

- Explain that a problem statement identifies the specific problem to be addressed by the campaign. It is a summary of the specific health problem, affected populations, potential cause of the problem, its magnitude, and the impact on society or specific communities.
- Remind participants that the problem statement should be included in the campaign plan.
- Note that the problem statement should be fairly succinct. The M&E plan does not need a 10-page description of the problem.

Campaign Description (cont.)

Problem Statement

- Zambia's maternal mortality ratio of 591/100,000 live births ranks among the highest in the world. This mortality is attributable to a number of complex and interwoven factors. Low contraceptive use in Zambia has resulted in high fertility trends over the years, with a current average fertility rate per women of 6.3. Only about half of pregnant women initiate antenatal care (ANC) by 5.1 months of gestation, preventing the opportunity for early detection of danger signs and adequate management of maternal complications. Half (52%) of all births occur at home, with rural areas recording much higher rates of home births than urban areas (66.5% as compared to 15.7%). But, even when a woman delivers in a facility, use of postpartum care services is extremely low. Nationwide, more than half (51%) of women do not receive any postnatal care.

Session 4: Foundations of the M&E Plan 10

Slide 4.10: Campaign Description (continued)
[Problem Statement Example]

4 minutes

- Ask for a volunteer to read through the example problem statement, and point out to the participants that this statement incorporates all of the issues discussed in the previous slide.
- Note that this campaign description included all of the elements in less than half a page.
- Ask participants:
 - How would you define campaign goals? And campaign objectives? What's the difference between the two?

Campaign Description (cont.)

Goals and Objectives

- A **goal** is a broad statement about the desired long-term outcome of the campaign.
 - For example, a reduction in home births in the Northern Province of Zambia.
- **Objectives** are statements of desired specific and measurable campaign results.
 - For example, to increase the number of facility-based births to 45 percent in the Northern Province of Zambia.
- These should come from the programme plan!

Session 4: Foundations of the M&E Plan 11

Slide 4.11: Campaign Description (continued)
[Goals and Objectives]

2 minutes

- Explain that the campaign goal is a broad statement about the desired long-term outcome of the programme. For example, a reduction in home births in the Northern Province of Zambia would be a goal.
- Explain that campaign objectives are statements of desired specific and measurable programme results. An example of an objective is to increase the number of facility-based births to 45 percent in the Northern Province of Zambia.
- Make clear that the people writing the M&E plan do not get to make up the goals and objectives for the campaign. These should come from the programme plan.

A presentation slide titled "Campaign Description (cont.)" with a red horizontal bar below the title. The main content is "Intervention Description" followed by a bulleted list: "Basic description of campaign interventions, including:" with sub-points: "Duration", "Geographic scope", "Target population", and "Intensity". At the bottom, it says "Session 4: Foundations of the M&E Plan" and "12".

Campaign Description (cont.)

Intervention Description

- Basic description of campaign interventions, including:
 - Duration
 - Geographic scope
 - Target population
 - Intensity

Session 4: Foundations of the M&E Plan 12

Slide 4.12: Campaign Description (continued)
[Intervention Description]

2 minutes

- Explain that a basic description of campaign interventions includes the length of the campaign, areas in the country or province in which activities will be implemented, and target audiences. It also includes some details on the intensity of the implementation—meaning the different outreach channels, types of materials, and general frequency of the outreach.
- Ask participants:
 - What is a conceptual framework?

A presentation slide with a white background and a blue border. The title "Campaign Description (cont.)" is centered at the top in a bold, black font. Below the title is a thick red horizontal line. Underneath the line, the text "Conceptual Framework" is written in a bold, black font. Below this, there are two bullet points in a standard black font. The first bullet point reads: "• Visual model of the factors thought to influence the problem of interest and how these factors relate to each other." The second bullet point reads: "• Session 5 will go into more details." At the bottom of the slide, there is a small, light blue footer area containing the text "Session 4: Foundations of the M&E Plan" on the left and the number "13" on the right.

Slide 4.13: Campaign Description (continued)
[Conceptual Framework]

3 minutes

- Remind participants that the training will go into much more detail on conceptual frameworks in Session 5, but briefly explain that it is a visual model of the factors thought to influence the problem of interest and how these factors relate to each other.
- Note that a conceptual model is a short, graphic way of capturing important aspects of either the problem or the programme approach so that you also consider those issues in your M&E plan.
- Ask participants:
 - What is a logic model?

Logic Model

- Shows the logic behind how the campaign should work by demonstrating how the interventions lead to achievement of the campaign's goal and objectives,
- Serves as the foundation of the M&E plan, and
- Will be discussed more in Session 5.

Session 4: Foundations of the M&E Plan 14

Slide 4.14: Logic Model

3 minutes

- Explain that a logic model is a common M&E framework that demonstrates how the programme works by showing the links between a programme's inputs, processes, and outputs and its ultimate outcomes and impact.
- Note that the logic model really serves as the foundation of your M&E plan, as it helps to guide you in the selection of indicators to both monitor and evaluate your campaign. It also shows you the logic behind how you think your programme will work and how you expect it to achieve the desired outcomes and impact.
- Mention that the training will go into more detail on M&E frameworks, and in particular on logic models, in Session 5.
- Ask participants:
 - What are the key pieces of information in a monitoring plan?

Monitoring Section of the M&E Plan

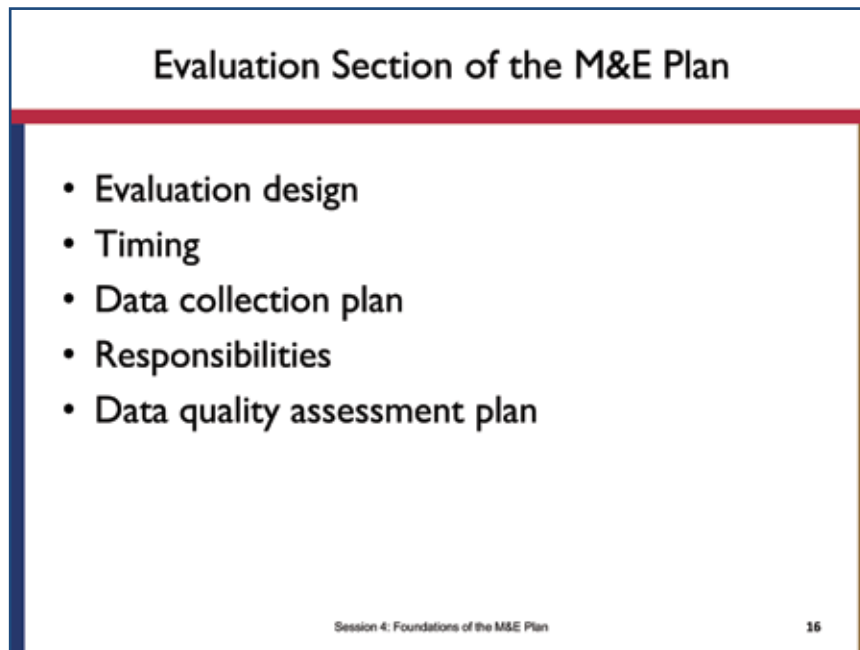
- Data collection plan
- Indicators (for monitoring *and* evaluation)
- Responsibilities
- Data collection tools needed
- Data quality assessment plan
- Data dissemination and use plan

Session 4: Foundations of the M&E Plan 15

Slide 4.15: Monitoring Section of the M&E Plan

3 minutes

- Explain that a monitoring plan should include
 - Data collection plan;
 - Indicators for both monitoring and evaluating the campaign;
 - Responsibilities for carrying out data collection, analysis, dissemination, and use;
 - Data collection tools needed;
 - Data quality assessment plan; and
 - Data dissemination and use plan.
- Mention that the training will go into more detail on these pieces of information in a number of the upcoming sessions.
- Ask participants:
 - What are the key pieces of information in an evaluation plan?



Slide 4.16: Evaluation Section of the M&E Plan

2 minutes

- Explain that an evaluation plan should include
 - Evaluation design,
 - Timing (timeframe for carrying out the evaluation),
 - Indicators,
 - Data collection plan,
 - Responsibilities, and
 - Data quality assessment plan.
- Mention that the training will go into more detail on these pieces of information in a number of different sessions.

Other Considerations

- **Budget**—make sure you have the resources available to complete your activities. These include
 - Financial resources,
 - Human resources, and
 - Infrastructure resources (office space, equipment, and supplies).
- **Mechanism for updating the plan.**

Session 4: Foundations of the M&E Plan 17

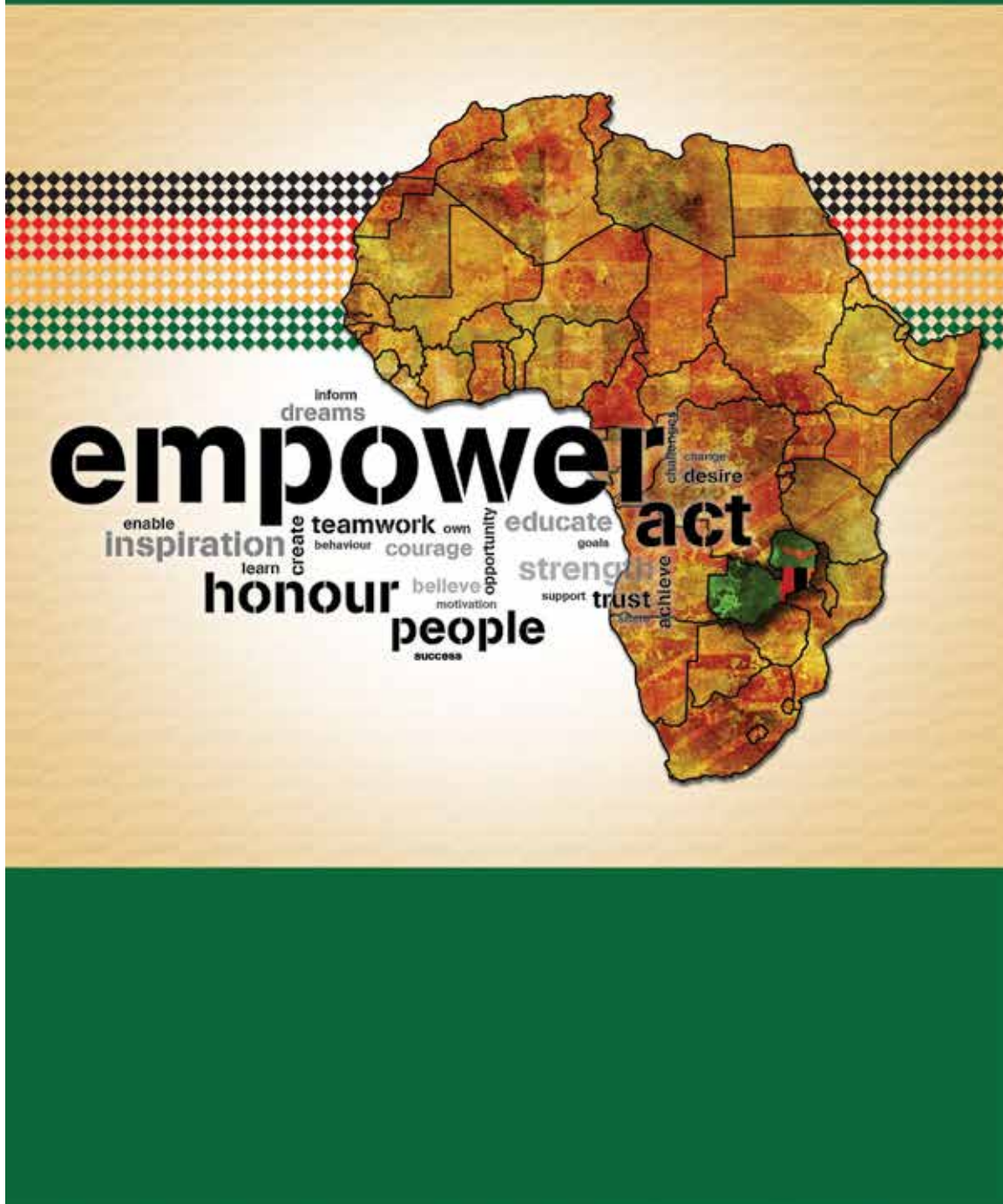
Slide 4.17: Other Considerations

3 minutes

- Stress that, before you develop an M&E plan, there are several factors to consider that the training will touch on throughout the sessions.
- Explain that you need to consider your financial, human, and infrastructure resources and determine whether you can implement and sustain your M&E activities.
- Explain that often, as we are implementing a campaign, changes are made along the way to the implementation plan. This could be due to a number of reasons, including suggested improvements and a decrease or increase in funding. It is important to remember that changes in the campaign plan can affect your M&E plan and thus, when changes are made, you will need to adjust your M&E plan accordingly. You will want to consider how and when to update your M&E plan. Will it be on an annual schedule and/or dependent on the campaign implementation activities?

Tea Break

SESSION 5



Session 5: M&E Frameworks



1 hour and 45 minutes

<p>Session Objectives</p>	<ul style="list-style-type: none"> • Explain the role of frameworks in an M&E plan • Distinguish between the benefits of a conceptual framework and a logic model • Create a conceptual framework • Create a logic model
<p>Methods</p>	<ul style="list-style-type: none"> • Lecture • Group discussion • Scenario exercise
<p>Materials</p>	<ul style="list-style-type: none"> • Flipchart • Markers

KEY DISCUSSION POINTS

- Explain that the M&E framework really serves as the foundation of the M&E plan, as it describes the logic of how the program is expected to work, provides the goals and objectives of the BCC campaign, and serves to inform what details and indicators will need to be collected to demonstrate the progress of the campaign.
- Highlight that there are many different types of M&E frameworks and it is likely many participants are familiar with other frameworks that we will not be presenting on in this session. However, for the purpose of doing M&E specifically for BCC campaigns, the conceptual framework and logic model are the best suited frameworks for BCC.
- Stress that the purpose of the M&E framework examples in the session is to demonstrate what elements should be included in the different frameworks and how to develop and use them for M&E purposes.
- Emphasise that M&E frameworks can be very complex. This is due to the complexity of the relationships between all the different factors that either indirectly or directly influence the behaviours (and ultimate health outcomes) in our target audiences. When developing frameworks, programme and M&E staff can choose whether to keep them simple or more complex. It will depend on what is most useful to the campaign or project.



Slide 5.1: M&E Frameworks

2 minutes

- Explain that this session will review the purpose of M&E frameworks and discuss which ones are most appropriate for BCC campaigns.
- Note that the frameworks section of the M&E plan is a large and key piece of the M&E puzzle. This session should provide you with a good idea of what frameworks are and how they are used in monitoring and evaluating health communications campaigns.

Objectives

- Participants will be able to
 - Explain the role of frameworks in an M&E plan,
 - Distinguish between the benefits of a conceptual framework and a logic model,
 - Create a conceptual framework, and
 - Create a logic model.

Session 5: M&E Frameworks 2

Slide 5.2: Objectives

2 minutes

- Read each of the objectives.
- Ask participants:
 - Does anyone have any questions before we begin with the session?
 - How would you define an M&E framework?

What Are Frameworks?

- Frameworks visually show
 - The components of a campaign or project, and
 - The sequence of steps needed to achieve the desired outcomes or objectives of the campaign.

Session 5: M&E Frameworks

3

Slide 5.3: What Are Frameworks?

2 minutes

- Explain that frameworks visually show the components of a campaign or project and the sequence of steps needed to achieve the desired outcomes or objectives.
- Ask participants:
 - Why are M&E frameworks important?

What Do Frameworks Do?

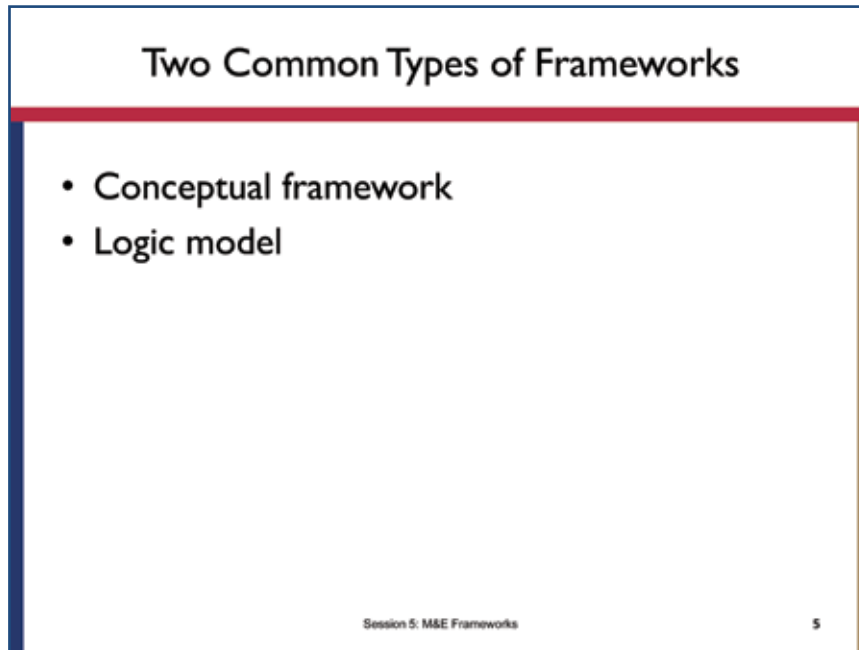
- Help increase understanding of how a campaign is supposed to work to achieve its goals and objectives,
- Define the relationships between factors key to implementation, and
- Outline the internal and external elements that could affect the campaign's success.

Session 5: M&E Frameworks 4

Slide 5.4: What Do Frameworks Do?

2 minutes

- Explain that frameworks are crucial for understanding and analysing how a campaign is supposed to work to achieve its goals and objectives.
- Explain that frameworks define the relationships between factors key to implementation and outline the internal and external elements that could affect the campaign's success.



Slide 5.5: Two Common Types of Frameworks

2 minutes

- Explain that there is no one perfect framework and that no single framework is appropriate for all situations, but there are two types that are used most commonly for BCC campaigns. These include a conceptual framework and logic model.
- Note to facilitator: Only if someone asks about the results framework or logic framework, explain that the results framework and the logic framework are used more and work better with health care delivery service programmes or interventions than with BCC.

Your Perspective

- What is your experience with the conceptual framework or logic model?
- What are the advantages of using them?
- How did using the framework help your campaign? Why?

Session 5: M&E Frameworks 6

Slide 5.6: Your Perspective

2 minutes

- Ask participants:
 - How many of you have used either a conceptual framework or a logic model?
 - What are the advantages of using them?
 - How did they help your project/programme?

Conceptual Framework

- Is useful for identifying and illustrating the factors and relationships that influence the outcome of a campaign or intervention;
- Can either illustrate the problem itself OR the problem and how your campaign addresses it; and
- Should include all relevant factors, but how those factors are pictured can look very different.

Session 5: M&E Frameworks 7

Slide 5.7: Conceptual Framework

2 minutes

- Explain that this framework is useful for identifying and illustrating the factors and relationships that influence the outcome of a campaign or intervention.
- Explain that this framework can either illustrate the problem itself OR the problem and how your campaign addresses it.
- Stress that this framework should include all relevant factors, but how those factors are pictured can look very different.

Conceptual Framework (cont.)

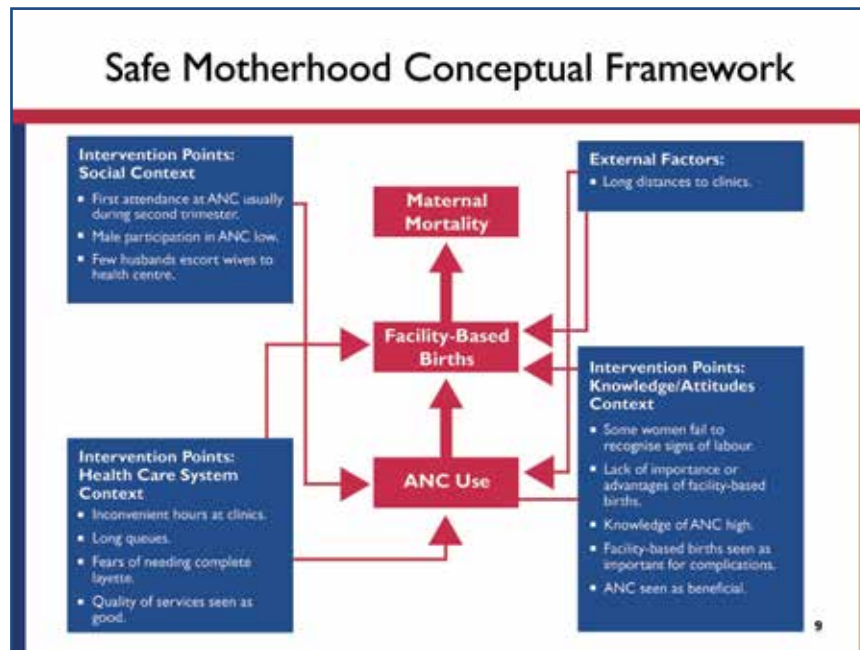
- Identifies variables and how they interact,
- Shows how programme components will work together to influence desired outcomes,
- Outlines expected results,
- Assists campaign planners with identifying appropriate goals/objectives, and
- Assists M&E staff in identifying appropriate indicators.

Session 5: M&E Frameworks 8

Slide 5.8: Conceptual Framework (continued)

2 minutes

- Explain that by identifying the variables that factor into campaign performance and depicting the ways that they interact, the results that can reasonably be expected from campaign activities are outlined.
- Note that the framework shows visually how programme components will work together to influence desired outcomes,
- Explain that clarifying this process permits campaign designers to develop appropriate goals and objectives and have a better appreciation for, or better understanding of, all the factors that influence their outcome (i.e., problem) of interest.



Slide 5.9: Safe Motherhood Conceptual Framework

7 minutes

- Explain that the image on the screen is an example of a conceptual framework for a Safe Motherhood project. The boxes list some of the social, knowledge or attitudes, external environmental, and health care system context factors that influence antenatal care (ANC) use, facility-based births, or both. ANC use and facility-based births in turn affect maternal mortality.
- Explain that the conceptual framework could be thought of as a map of causes and effects.
- Point out that one of the factors in the health care system context is long queues at the clinic. Long queues affect whether women use ANC. ANC affects whether women give birth in a health facility, and that, in turn, affects maternal mortality.
- Tell the participants that we are going to think through several scenarios.
 - Ask the participants what they would expect as a result if we could talk with people about ways to avoid long queues.
 - Note to facilitator: Ideally you would expect that learning how to avoid long queues would increase ANC use, which would in turn affect facility-based births and, in the end, maternal mortality.
- Explain that you can also start from the results we want to see. Ask participants, “If this were a conceptual framework of the safe motherhood context in the area in which you are working, and you wanted to plan a communication programme to increase facility-based births, where would you start?”
 - Note to facilitator: Pick one of the factors in any of the blue boxes on the slide and walk through how they are linked. For example, you may want to pick “Fears on needing complete layette” under the health care system context. Your communications project could emphasise that women only really need to bring to the clinic a soft cloth to wrap the baby. A complete layette is not necessary.

- Ask participants how this type of framework guides them in deciding where they might want to start.
 - Note to facilitator: The framework shows the context and what factors may or may not be affected by a communications campaign. It gives you a menu of entry points from which you can choose.
- Explain that we are going to look at another factor: Knowledge of ANC is high. Ask, “How might that affect maternal mortality, and what implications does that have for where your programme should or should not intervene?”
- Emphasise that this information tells us that, because knowledge of ANC is already high, we will not need to address that in this campaign. Instead, we can see from these factors that we should be using our time to look at promoting recognition of signs of labour, for example.

Conceptual Frameworks in M&E

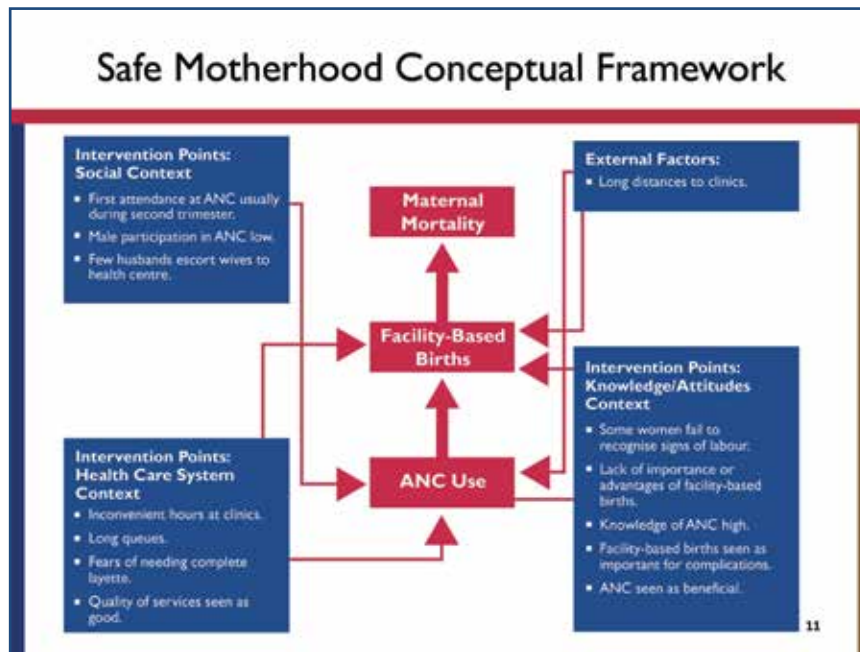
- Helps to identify intermediate factors, and
- Is most helpful in campaign evaluation.
 - Identifies contextual factors and their causes, and
 - Helps evaluators take appropriate factors into consideration when assessing a campaign.

Session 5: M&E Frameworks 10

Slide 5.10: Conceptual Frameworks in M&E

5 minutes

- Explain that another way to think about it is that conceptual frameworks help to identify intermediate factors that have an influence on the campaign's desired outcome (behaviour change). For instance, we may need to change attitudes or knowledge before we can expect someone to change his or her behaviour.
- Explain that these frameworks also help to identify other contextual factors that influence or affect the campaign's desired outcome, but that are outside the scope of the campaign to address. (For instance, if long distances to health facilities are a major barrier for women, this will affect utilisation of ANC and delivery services. However, this is not a factor that a BCC campaign will be able to address.) It is important to identify these factors, as they are important for evaluators to consider when evaluating a campaign.
- Note that many of these factors should have been identified in the campaign-planning stage, but if a conceptual framework was not done at that point, doing one now can help make those factors explicit so they can be considered in the M&E plan.
- Explain that, by identifying the variables that factor into programme performance and depicting the ways in which they interact, the results that can reasonably be expected from campaign activities are outlined.
- Explain that clarifying this process permits campaign designers to develop valid measures for evaluating the success of the outcomes and also guides the identification of appropriate indicators.



Slide 5.11: Safe Motherhood Conceptual Framework

5 minutes

- Explain to participants that they are working on a campaign to reduce maternal mortality. Using this conceptual framework as a guide, what paths and factors might you want to look at? What needs to change before maternal mortality goes down?
- Invite participants to look at another example. According to this framework, many women apparently don't see the importance or advantage of a facility-based birth. Ask participants, "If your communication campaign were focusing on publicising why facility-based births are important and advantageous, what would you expect as a result of that campaign?"
- Ask other participants to give feedback on the expected results.

Scenario Exercise: Conceptual Framework

- What would your conceptual framework look like for the HIV/AIDS campaign?
 - What categories of factors would you include?
 - What factors would you include?

Session 5: M&E Frameworks 12

Slide 5.12: Scenario Exercise: Conceptual Framework

65 minutes

- Explain that for the rest of the training, participants will be working in small teams for the exercises. Break the group into teams of about four people. Each team should ideally be a mix of M&E and programme staff members. Assign each team to focus on either the multiple concurrent partnership (MCP) or mother-to-child transmission of HIV/AIDS (MTCT) component of the campaign.
- Ask each team to come up with a name for themselves.
- Hand out a piece of flipchart paper and markers to each M&E team.
- Ask the teams to draw a conceptual framework for their component of the HIV/AIDS (MCP or MTCT) scenario. If possible, ask a programme staff member in each team to lead the activity with the input of his or her fellow teammates.
- Point out that there is a blank page in their booklets to draw their conceptual frameworks. They can use this as a reference after the training.
- Allow 30 minutes for the teams to draw their framework and 30 minutes for them to present and the group to discuss.
- Note that this concludes this session and the first day of the training.
- Ask for a volunteer or volunteers to provide a short (5–6 minute) review of today's sessions at the start of the training tomorrow morning.

End of Day One Sessions

Administrative Task 3:



Day One Evaluation

Time: 15 minutes

Process:

1. Explain that the purpose of the daily evaluation is to gather feedback on Day One of the training. Tell participants that the training team will meet in the evening to discuss the daily evaluations and will make decisions to alter the training for the following days, as feasible.
2. Distribute the daily evaluation forms.
3. Tell participants that they will have 5 minutes to complete the form.
4. Remind participants not to write their names on the form.
5. Ask participants to turn their forms face down when completed.
6. Collect all completed forms and store them to review later.

Materials:

- Daily evaluation forms
- Pens or pencils

DAY TWO



Administrative Task 4:

Day Two Reporting

Time: 10 minutes

Process:

1. Remind participants that the purpose of the daily reporting is to summarise what the group discussed the day before.
2. Ask the participant who volunteered yesterday to come up to the front of the room and provide the daily report.
3. Ask the other participants if there is anything they would add to the report.



Session 5: M&E Frameworks (continued)

2 hours

- Before continuing with the slides for Session 5, give a brief summary of the concepts that were covered in the first part of Session 5.
- Ask participants:
 - How would you define a logic model?

Logic Model

- A logic model is a visual way of showing specific activities and the expected results of those activities.
- It is a management tool that gives a picture of how a campaign is supposed to work.
- It is a causal chain that shows each link and how it leads to the campaign's end goal.

Session 5: M&E Frameworks 13

Slide 5.13: Logic Model

5 minutes

- Explain that a logic model is a visual way of showing specific activities and the expected results of those activities. It is a management tool that gives a picture of how a campaign is supposed to work.
- Explain that a logic model is really a causal chain that shows each link and how it leads to the next link and eventually to a campaign's end goal.
- Note that another way to describe the logic model is as a road map. Like a road map, a logic model shows the route (or steps taken) to get to your destination or desired result. A good logic model will show how each step will lead you closer to your end goal.
- Ask participants:
 - What are some of the essential components of a logic model?
- Write the participant responses on a flipchart.

Components of Logic Models

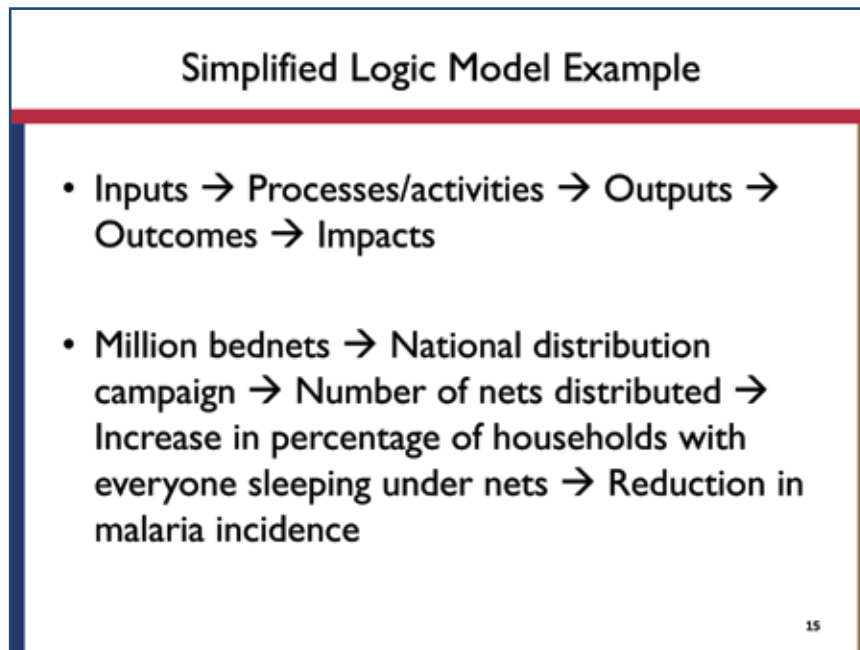
- Health/behavioural context (optional)
- Inputs
- Processes
- Outputs
- Outcomes
- Impacts

Session 5: M&E Frameworks 14

Slide 5.14: Components of Logic Models

4 minutes

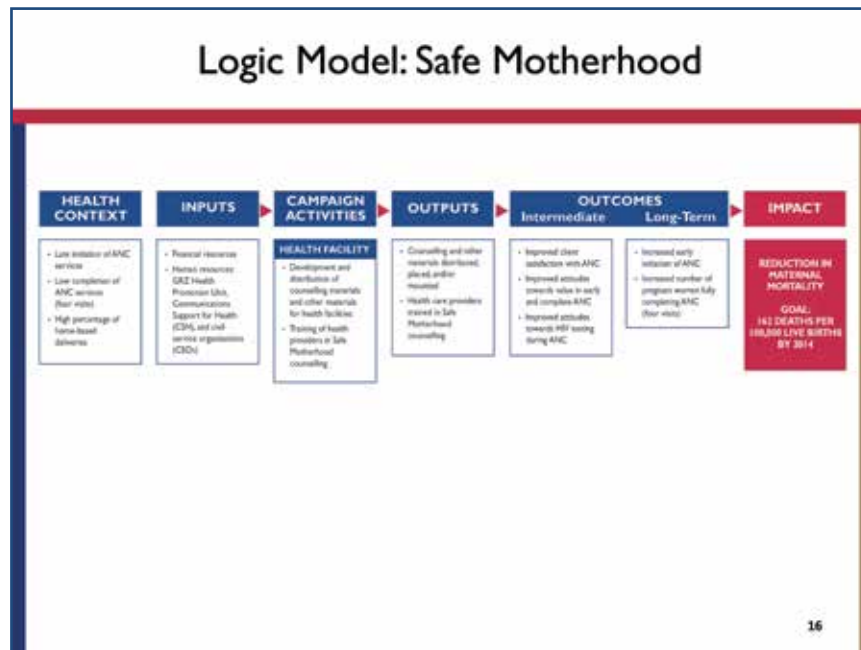
- Compare the list of components with the list that the participants created.
- Explain that we will now look at a simplified logic model to see how these components work together to map your campaign's work, from inputs to impacts.



Slide 5.15: Simplified Logic Model Example

3 minutes

- Note that the slide shows an example of a very simple logic model. It shows what you are putting in and what you are getting out.
- Point out that inputs should lead to processes and activities, those processes and activities should lead to outputs, outputs should lead to outcomes, and outcomes should lead to impacts.
- Explain that in programme terms, this means that you have a million bednets (inputs), you have a national distribution campaign to promote those bednets (your processes or activities), and that campaign leads to the number of bednets distributed (your outputs). Those bednets distributed should translate into an increased percentage of households with everyone sleeping under a bednet (outcome), and people sleeping under bednets should lead to a reduction in the incidence of malaria (impact).
- Ask participants if they have any questions on how this bednet campaign would work and how one step leads to the next?



Slide 5.16: Logic Model: Safe Motherhood

3 minutes

- Point out that the slide shows an example of a logic model for Safe Motherhood. Note that you will talk about each of the components (highlighted in the blue boxes) one by one.
 - Note to facilitator: The text on the slide is quite small and difficult to read from a distance. Refer participants to the Safe Motherhood handout that is on page 164 of their *Participant’s Guide*.
- Explain that one component frequently added to logic models is that of context.
- Ask participants:
 - How would you define this first column—health context?
 - What are some examples of things you might include under health context?
- Write the health context examples on a flipchart.

Logic Model: Context

- **Underlying conditions (context) of the campaign**
 - Current behaviours
 - Disease burden
 - Social situation or cultural context
 - Communication access or technological context
 - Political situation or economic conditions

Session 5: M&E Frameworks 17

Slide 5.17: Logic Model: Context

3 minutes

- Explain that context refers to the underlying conditions of the campaign and may include information about disease burden, society, economy, culture, communication, politics, and technology.
- Compare the participant’s list to the list of underlying conditions on the slide.

Safe Motherhood: Context

- **Safe Motherhood Health Context**
 - Late initiation of ANC services,
 - Low completion of ANC services, and
 - High percentage of home-based deliveries.

HEALTH CONTEXT

- Late initiation of ANC services
- Low completion of ANC services (four visits)
- High percentage of home-based deliveries

18

Slide 5.18: Safe Motherhood: Context

3 minutes

- Explain that we have three factors under “Health Context” in the Safe Motherhood logic model (Read each factor).
- Ask if anyone has any questions on the health context for the Safe Motherhood campaign.
- Ask participants:
 - How would you define inputs, which is the next column in a logic model?
 - What are some examples of inputs?
- Write the input examples on a flipchart.

Logic Model: Inputs

- **Inputs:** The resources invested in a campaign to be dedicated or consumed.
- **Can include**
 - Technical assistance
 - Computers
 - Supplies (condoms)
 - Facilities
 - Staff
 - Time
 - Money
 - Training

Session 5: M&E Frameworks 19

Slide 5.19: Logic Model: Inputs

2 minutes

- Explain that inputs are the resources invested in a campaign that are to be dedicated or consumed.
- Compare the list of input examples to the list that the participants created.

Safe Motherhood: Inputs

- **Safe Motherhood Inputs**
 - Financial resources
 - Human resources
 - GRZ Health Promotion Unit
 - CSH
 - CSOs

INPUTS

- Financial resources
- Human resources: GRZ Health Promotion Unit, Communications Support for Health (CSH), and civil service organisations (CSOs)

20

Slide 5.20: Safe Motherhood: Inputs

3 minutes

- Note that in our Safe Motherhood logic model we have both financial and human resources listed under “Inputs.”
- Ask participants:
 - Does anyone have any questions on our logic model so far?
 - How would you define processes or activities, which is the next column in the logic model?
 - What are some examples of processes or activities?
- Write suggested process/activity examples on a flipchart.

Logic Model: Processes

- **Processes/activities:** The many things that a campaign does, using inputs, to fulfill its goals and objectives.
- **For example:**
 - Developing communications guidelines
 - Training educators
 - Creating radio public service announcements
 - Producing and distributing materials
 - Placing billboards

Session 5: M&E Frameworks 21

Slide 5.21: Logic Model: Processes

3 minutes

- Explain that the processes/activities are the things that a campaign does, using inputs, to fulfil its goals and objectives.
- Compare the list of process/activity examples with the list that the participants created.

Safe Motherhood: Processes

- **Safe Motherhood Campaign Activities**
 - Development and distribution of counselling materials and other materials for health facilities, and
 - Training of health providers in Safe Motherhood counselling.

CAMPAIGN ACTIVITIES

HEALTH FACILITY

- Development and distribution of counselling materials and other materials for health facilities
- Training of health providers in Safe Motherhood counselling

22

Slide 5.22: Safe Motherhood: Processes

4 minutes

- Point out that the Safe Motherhood campaign activities include
 - Development and distribution of counselling materials and other materials for health facilities, and
 - Training of health providers in Safe Motherhood counselling.
- Ask participants:
 - How would you define outputs?
 - What are some examples of outputs?
- Write the output examples on a flipchart.

Logic Model: Outputs

- **Outputs:** The immediate and direct products or consequences of campaign activities.
- Outputs are often measured by the amount of work accomplished, time consumed, funds spent, or people involved.
- For example:
 - The number of learning sessions that youth participated in,
 - The number of youth who participated in different campaign activities, and
 - The number of professionals who volunteered.

Session 5: M&E Frameworks 23

Slide 5.23: Logic Model: Outputs

3 minutes

- Explain that outputs are the immediate and direct products or consequences of campaign activities.
- Explain that outputs are often measured by the amount of work accomplished, time consumed, funds spent, or people involved.
- Compare the list of output examples with the list that the participants created.

Safe Motherhood: Outputs

- **Safe Motherhood Outputs**
 - Counselling and other materials distributed, placed, and/or mounted; and
 - Health care providers trained in Safe Motherhood counselling.

OUTPUTS

- Counselling and other materials distributed, placed, and/or mounted
- Health care providers trained in Safe Motherhood counselling

24

Slide 5.24: Safe Motherhood: Outputs

2 minutes

- Point out that the outputs we have listed in the Safe Motherhood logic model are counselling materials placed and health care providers trained.
- Ask participants:
 - How would you define outcomes?
 - What are some examples of outcomes?
- Write the outcome examples on a flipchart.

Logic Model: Outcomes

- **Outcomes:** The set of intermediate or long-term changes achieved by the campaign through the execution of activities.
- These include the multitude of benefits gained by the people, communities, and organisations served by the campaign during or after participation.
- For example:
 - Consider changes in knowledge, skills, attitudes, or behaviour, and
 - Can be divided into initial, intermediate, and longer term outcomes.

Session 5: M&E Frameworks 25

Slide 5.25: Logic Model: Outcomes

4 minutes

- Explain that outcomes are the set of intermediate or long-term results at the population level that are achieved by the campaign through the execution of activities. The degree of causal relationship is usually very difficult to determine, so outcomes are often spoken of in terms of being related in different ways to campaign activities.
- Explain that outcomes include the multitude of benefits gained by the people, communities, and organisations served by the campaign during or after participation.
- Compare the list of outcome examples with the list that the participants created.

Safe Motherhood: Outcomes

	OUTCOMES	
	Intermediate	Long-Term
<ul style="list-style-type: none"> • Safe Motherhood Outcomes Intermediate • Improved client satisfaction with ANC, • Improved attitudes towards value in early and complete ANC, and • Improved attitudes towards HIV testing during ANC. Long-Term (behavioural) • Increased early initiation of ANC, and • Increased number of pregnant women fully completing ANC (four visits). 	<ul style="list-style-type: none"> • Improved client satisfaction with ANC • Improved attitudes towards value in early and complete ANC • Improved attitudes towards HIV testing during ANC 	<ul style="list-style-type: none"> • Increased early initiation of ANC • Increased number of pregnant women fully completing ANC (four visits)

26

Slide 5.26: Safe Motherhood: Outcomes

3 minutes

- Point out that outcomes can include both intermediate and long-term (behavioural) outcomes.
- Explain that for this logic model we have several intermediate outcomes listed.
 - Improved client satisfaction with ANC,
 - Improved attitudes towards value in early and complete ANC, and
 - Improved attitudes towards HIV testing during ANC,
- Note that several long-term (behavioural) outcomes are also listed.
 - Increased early initiation of ANC, and
 - Increased number of pregnant women fully completing ANC (four visits).
- Ask participants:
 - How would you define impacts?
 - What are some examples of impacts?
- Write the impact examples on a flipchart.

Logic Model: Impacts

- **Impacts:** The long-term effects, or end results, of the campaign.
 - The impact of a health communication campaign is a change in health status.
- **For example:**
 - Changes in health status or conditions that the campaign is intended ultimately to influence (mortality, morbidity, fertility, etc.), as measured by appropriate indicators; and
 - Reduction in malaria morbidity.

Session 5: M&E Frameworks 27

Slide 5.27: Logic Model: Impacts

3 minutes

- Explain that impacts are the long-term effects, or end results, of the campaign. This is the ultimate goal of our efforts and refers to changes in actual health status.
- Explain that measuring impact in this way is different than using an impact evaluation, which focuses on examining how much of an observed change in outcomes or “impact” can be attributed to the campaign.
- Compare the list of impact examples with the list that the participants created.

Safe Motherhood: Impacts

- **Safe Motherhood Impact**
 - Reduction in maternal mortality

IMPACT

REDUCTION IN MATERNAL MORTALITY

GOAL:
162 DEATHS PER
100,000 LIVE BIRTHS
BY 2014

28

Slide 5.28: Safe Motherhood: Impacts

1 minute

- Note that the final impact of this project is a reduction in maternal mortality.

Scenario Exercise: Logic Model

- What would your logic model look like for the HIV/AIDS campaign?

Session 5: M&E Frameworks 29

Slide 5.29: Scenario Exercise: Logic Model

65 minutes

- Provide each team with a piece of flipchart paper to write out their logic models based on the scenario.
- Point out that there is a template for the logic model in their *Participant's Guide* on page 165. They can fill it in and keep it as a reference for after the training.
- Allow 30 minutes for teams to draft their logic models for their components of the campaign (MCP or MTCT).
- Allow 30 minutes for all of the teams to present their logic models to the whole group.

Frameworks Summary

- **Frameworks**
 - Help develop a clearer understanding of the goals and objectives of a campaign,
 - Help identify measurable objectives for the short term and long term,
 - Define relationships between factors, and
 - Serve as the foundation for selecting indicators.

Session 5: M&E Frameworks 30

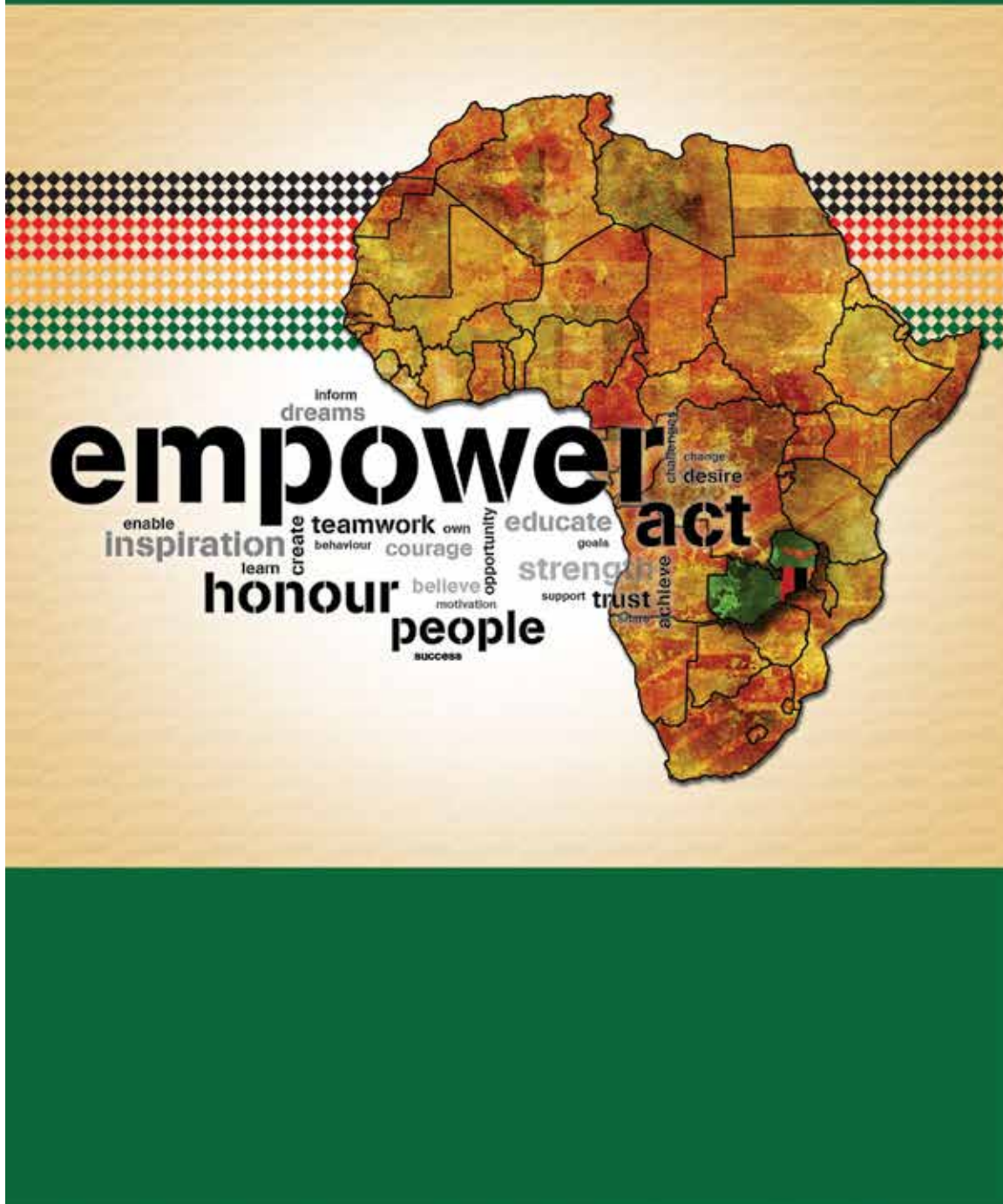
Slide 5.30: Frameworks Summary

2 minutes

- Explain that using frameworks is one way to develop a clearer understanding of the goals and objectives of a project, with an emphasis on identifying measurable objectives for both the short term and long term.
- Explain that frameworks, such as the two types just discussed, also help define the relationships between factors key to the implementation and success of a project, both internal and external to the programme context.
- Note that this design process deepens the understanding of managers, implementers, and other partners in many practical ways, including serving as the foundation for selecting appropriate, useful M&E indicators.

Tea Break

SESSION 6



Session 6: Indicators



3 hours

Session Objectives	<ul style="list-style-type: none"> • Define an indicator • Compare and contrast the five types of indicators • Create indicators for each of the five types • Explain the role of intermediate outcome indicators • Identify intermediate outcome indicators other than knowledge
Methods	<ul style="list-style-type: none"> • Lecture • Group discussion • Exercise • Scenario exercise
Materials	<ul style="list-style-type: none"> • Flipchart • Markers

KEY DISCUSSION POINTS

- Highlight that there are five types of indicators. The first three types of indicators — inputs, processes, and outputs—are for monitoring BCC campaigns. They help to track the progress and implementation of the campaign. The last two types —outcomes and impact indicators—are for evaluating our BCC campaigns. They help to determine whether the BCC campaign met its intended objectives and goals—whether the campaign had an effect or impact on knowledge, attitudes, behaviours, and ultimately health status.
- Explain that it is important to think about not just what behaviours the campaign is trying to influence, but to also think about what factors need to be changed in order to ultimately influence a change in a behaviour. These other factors could include knowledge, attitudes/beliefs, self-efficacy, social norms, etc.
- Stress that it is important to have at least one indicator to measure each component of the BCC campaign.



Slide 6.1: Indicators

1 minute

- Explain that this session will review the purpose and types of indicators used in M&E for BCC campaigns.

Objectives

- Participants will be able to
 - Define an indicator,
 - Compare and contrast the five types of indicators,
 - Create indicators for each of the five types,
 - Explain the role of intermediate outcome indicators, and
 - Identify intermediate outcome indicators other than knowledge.

Session 6: Indicators 2

Slide 6.2: Objectives

2 minutes

- Read each of the objectives.
- Ask participants:
 - Does anyone have any questions before we begin with the session?
 - How would you define indicators?

What Is an Indicator?

An indicator is

- A **variable**
- That **measures**
- **One aspect** of a campaign or health outcome.

Session 6: Indicators 3

Slide 6.3: What Is an Indicator?

2 minutes

- Explain that an indicator is a variable that measures one aspect of a campaign or health outcome.
- Note that the purpose of indicators is to track whether campaign activities are carried out as planned or to determine whether a campaign activity has caused a change or difference in a particular outcome of something else.
- Explain that we expect the value of an indicator to vary over time. Its value will change from a given, or baseline, level at the time the campaign begins to another value after the campaign and its activities have had time to make their impact felt. At that point the variable, or indicator, is calculated again.

What Is an Indicator? (cont.)

- What we use to measure whether campaigns have met their objectives;
 - Measures the value of the change in meaningful units for campaign management.
- A narrowly defined sign or marker used to measure *one aspect* of a campaign; and
- Guide to show how close a campaign is to where it is supposed to be.
 - Should have at least one indicator for each significant aspect of campaign activities.

Session 6: Indicators 4

Slide 6.4: What Is an Indicator? (continued)

5 minutes

- Explain that an indicator is a measurement. It measures the value of a specific campaign aspect/component in meaningful units for campaign management; a measurement can be compared to past and future units and values.
- Explain that an indicator focuses on a single aspect of a campaign or project. It may be an input, an output, or an overarching objective (such as a specific behavioural outcome), but its related metric (the calculation or formula that the indicator is based upon) will be narrowly defined in a way that captures that aspect as precisely as possible.
- Explain that a full set of indicators will include at least one indicator for each significant aspect of campaign activities. This translates into at least one indicator for each element within the campaign’s M&E framework that can tell you, as a campaign manager, if the project is accomplishing what you thought it would.

Common Indicator Metrics

- **Counts**
 - Number of providers trained in using BCC materials, and
 - Number of brochures or posters distributed.
- **Calculations: Percentages, rates, and ratios**
 - % of facilities with providers trained in using materials, and
 - Under-5 mortality rate.
- **Index, composite measures**
 - Exposure Index comprising the sum of scores on all exposure indicators, and
 - Wealth Index.

Session 6: Indicators 5

Slide 6.5: Common Indicator Metrics

3 minutes

- Explain that a metric is the calculation or formula that the indicator is based upon. Calculation of the metric establishes the indicator's objective value at a point in time. Even if the factor itself is subjective, like the attitudes of a target population, the indicator metric calculates its value objectively at a given time.
- Explain that there are three categories of common indicator metrics: counts, calculations, and indexes.
- Explain that counts are simple numbers, such as the number of health providers trained to use BCC materials or the number of health brochures or posters distributed.
- Explain that calculations include percentages, rates, and ratios, such as the percentage of facilities with providers trained on how to use the BCC materials or the mortality rate for children under 5 years of age.
- Explain that the last category includes index and composite measures, such as the wealth index. In BCC, an exposure index often is developed to measure exposure to a campaign that has several components or is implemented through different channels. An exposure index also is used to examine the extent or quality of exposure to a campaign.

How To Construct an Indicator (Percentages)

- A percentage is a numerator divided by a denominator.
- For example:
 - Numerator: Number of people surveyed who recall hearing or seeing (spontaneous and aided/prompted) the campaign.
 - Denominator: Total number of people surveyed.

Session 6: Indicators 6

Slide 6.6: How To Construct an Indicator (Percentages)

2 minutes

- Explain that it is important to clearly define how you will construct an indicator using percentages. For percentages, you must ALWAYS specify a numerator and a denominator.
- Explain that in this example, the numerator is the number of people reporting during a survey that they have heard of the campaign, and the denominator is the total number of people surveyed. By dividing the numerator by the denominator, a person is able to calculate the percentage of the audience who recalls hearing or seeing a specific campaign.

Components of a Percentage Indicator

- **Indicator:** The percentage of men who used a condom during their last sexual intercourse.
- What would the numerator be?
- What would the denominator be?

Session 6: Indicators 7

Slide 6.7: Components of a Percentage Indicator

3 minutes

- Explain to participants that they will need to decide what information they will need in order to calculate the percentage indicator on the slide.
 - Read the indicator.
- Ask participants:
 - What would the numerator be? What would the denominator be? Discuss.
 - Who can name the types of indicators? What are they?
- Write participant responses on a flipchart.

Five Types of Indicators

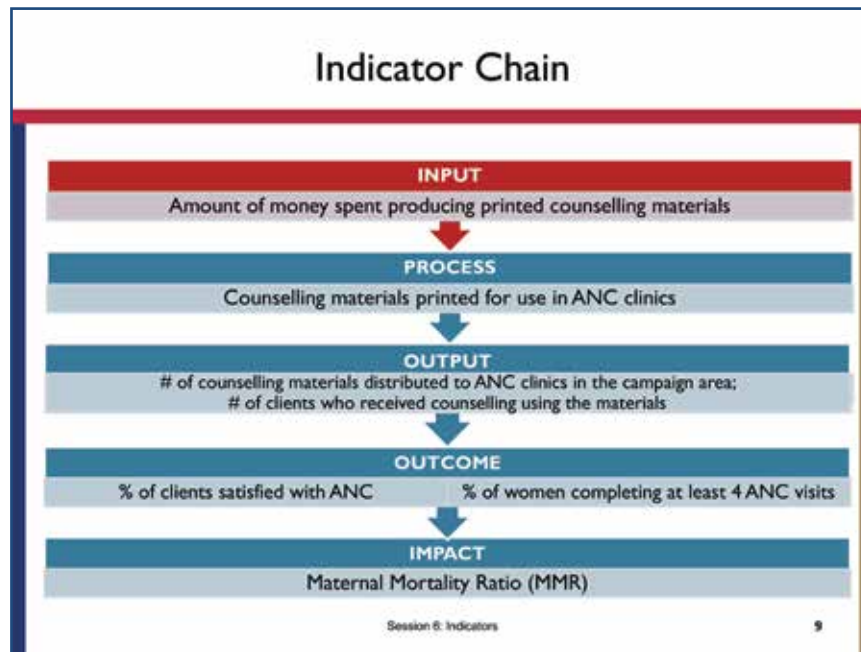
- Different types of indicators measure different things.
 - Input,
 - Process,
 - Output,
 - Outcome (including intermediate and long-term indicators), and
 - Impact.

Session 6: Indicators 8

Slide 6.8: Five Types of Indicators

3 minutes

- Compare the list on this slide to the participant responses to the previous question.
- Ask participants:
 - How are these indicators related to each other?



Slide 6.9: Indicator Chain

3 minutes

- Explain that each of the indicators feeds into the next.
- Walk through the chain, using the ANC example.
- Mention that the group will now discuss input indicators in greater depth, tackling each type of indicator one at a time.
- Ask participants:
 - How would you define an input indicator?

Input Indicators

- Report the amount of resources used to develop and implement a campaign,
 - Resources can be human, financial, or material.
- Gather information from accounting and campaign management records, and
- Allow managers to monitor budget and cost-effectiveness.

Session 6: Indicators 10

Slide 6.10: Input Indicators

3 minutes

- Explain that input indicators report the amount of resources (human, financial, and material) that have been used to develop and implement a campaign. Information on these indicators usually comes from accounting and campaign management records. This allows managers to monitor whether they are staying on budget and assess the cost-effectiveness of the project or campaign. If someone wants to replicate what was done with the campaign, he or she will be able to look at the inputs to see how much a similar campaign may cost.
- Ask participants:
 - What are some examples of input indicators for a BCC campaign?
- Write the participant responses on a flipchart.

Examples of Input Indicators

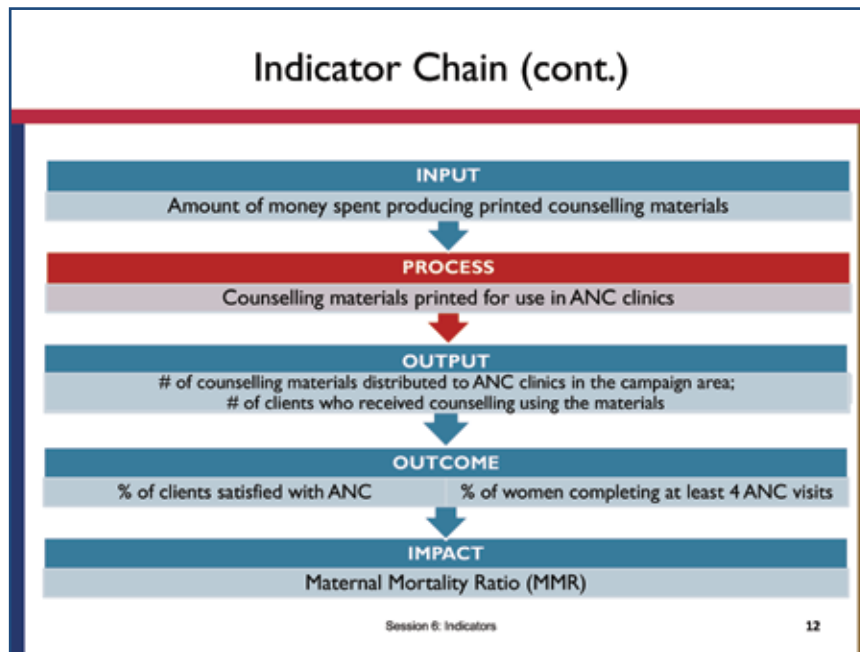
- Funds spent on various components of your campaign, such as
 - Newspaper inserts
 - Billboards
 - Radio programmes
- Cost and number of bednets procured.

Session 6: Indicators 11

Slide 6.11: Examples of Input Indicators

2 minutes

- Review the examples and compare them to the participant responses to the previous question.



Slide 6.12: Indicator Chain (continued)

2 minutes

- Explain that you will now go into greater depth about process indicators.
- Point out again that input indicators feed into process, and process feeds into output, as shown in the ANC example.
- Ask participants:
 - How would you define process indicators?
 - What are some examples of process indicators?
- Write the participant responses on a flipchart.

Process Indicators

- Show what campaign activities were carried out
 - Number of trainings held
 - Number of radio episodes produced
 - Number of billboards bought
 - Number of focus groups held

Session 6: Indicators 13

Slide 6.13: Process Indicators

2 minutes

- Explain that process indicators show your campaign activities.
- Review the examples and compare them to the participant responses to the previous question.

Process Indicators (cont.)

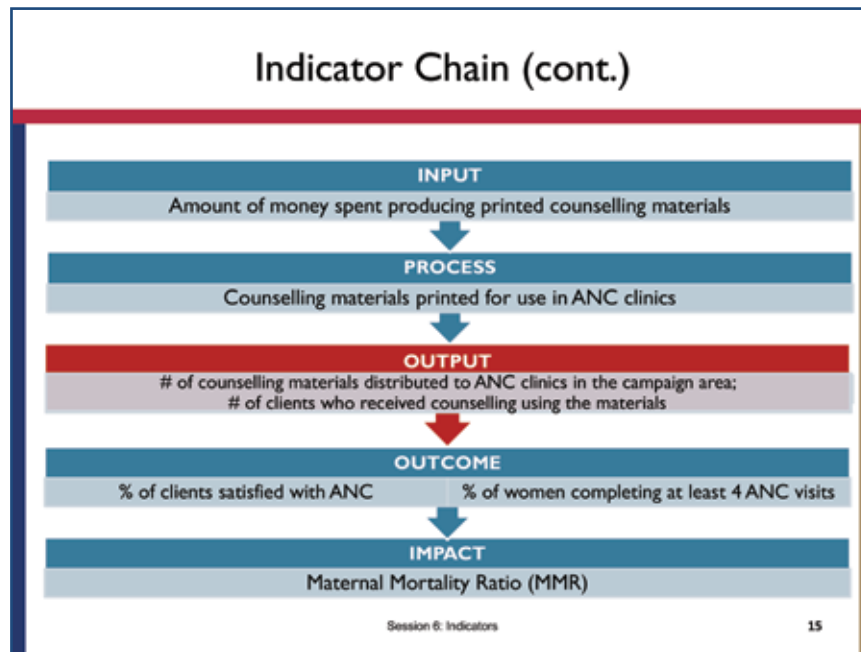
- Process indicators also demonstrate the **quality** of activities.
- One way to assess quality is to look at how the campaign was designed.
 - Was the campaign plan reviewed by a technical working group?
 - Were materials pilot-tested?
 - Did the campaign include formative research?
 - Were the campaigns pilot-tested before becoming finalised?

Session 6: Indicators 14

Slide 6.14: Process Indicators (continued)

2 minutes

- Explain that process indicators also demonstrate the quality of activities. One way to assess quality is to look at how the campaign was designed.
- Explain that process indicators help answer questions such as
 - Was the campaign plan reviewed by a technical working group?
 - Were campaign materials pilot-tested?
 - Did the campaign include formative research?
 - Were the campaigns pilot-tested before becoming finalised?



Slide 6.15: Indicator Chain (continued)

2 minutes

- Explain that you will now go into greater depth about output indicators.
- Point out again that process indicators feed into output, and output feeds into outcome, as shown in the ANC example.
- Ask participants:
 - How would you define output indicators?
 - What are some examples of output indicators?
- Write the participant responses on a flipchart.

Output Indicators

- Output indicators record what your activities have achieved.
 - Number of people trained,
 - Number of brochures distributed,
 - Number of people participating in one-on-one counselling, and
 - Number of people who participated in community event.

Session 6: Indicators 16

Slide 6.16: Output Indicators

2 minutes

- Explain that output indicators show the results of your activities or process indicators.
- Review the examples and compare them to the participant responses to the previous question.

Output Indicators (cont.)

- Output indicators also include **reach** and **exposure**. For example:
 - Number of people reached by a radio programme,
 - Number of people reached by a newspaper insert,
 - Percentage of audience who recalls hearing or seeing a specific campaign, and
 - Percentage of audience who recalls a specific component/characteristic (e.g., main character, event, jingle, logo) of a campaign.

Session 6: Indicators 17

Slide 6.17: Output Indicators (continued)

1 minute

- Explain that output indicators also include the reach of and exposure to the campaign. Go over each of the examples.

Output Indicators vs. Process Indicators

- **Process indicators show activities themselves.**
 - Output indicators show the **outputs** of those activities.
- **Process indicators track whether you are doing the activities you said you were going to do.**
 - Output indicators show the result of what you have done.

Session 6: Indicators 18

Slide 6.18: Output Indicators vs. Process Indicators

2 minutes

- Explain that process indicators show the activities themselves, while output indicators show the outputs of those activities. For example, output indicators can be used to estimate the percentage of spots or drama episodes that were broadcast according to plan. Process indicators would only look at how many spots or episodes were produced.
- Explain that process indicators track whether you are doing the activities you said you were going to do, while outputs are the result of what you have done.
- Note that process and output indicators are often linked and reported together.

**Scenario Exercise:
Input, Process, and Output Indicators**

- Determine the input, process, and output indicators for your HIV/AIDS campaign; and
- Create two of each kind of indicator.

Session 6: Indicators 19

Slide 6.19: Scenario Exercise: Input, Process, and Output Indicators

40 minutes

- Ask each team to spend 20 minutes identifying two examples each of input, process, and output indicators for one national and one community-level activity from their assigned component (MCP or MTCT) of the HIV/AIDS campaign.
- Hand out two pieces of flipchart paper to each team—one for the national activity and one for the community-level activity. Tell participants to organise their indicators similar to the indicator chain example and to leave room for the outcome and impact indicators that they will fill in later.
- Let participants know that their booklets also include two indicator chain templates where they can also write their indicators, and they can refer back to them after the training.
- Allow 20 minutes for the teams to present their indicators and for the group discussion.

Lunch



Energiser 2: Mumble Jumble

15 minutes



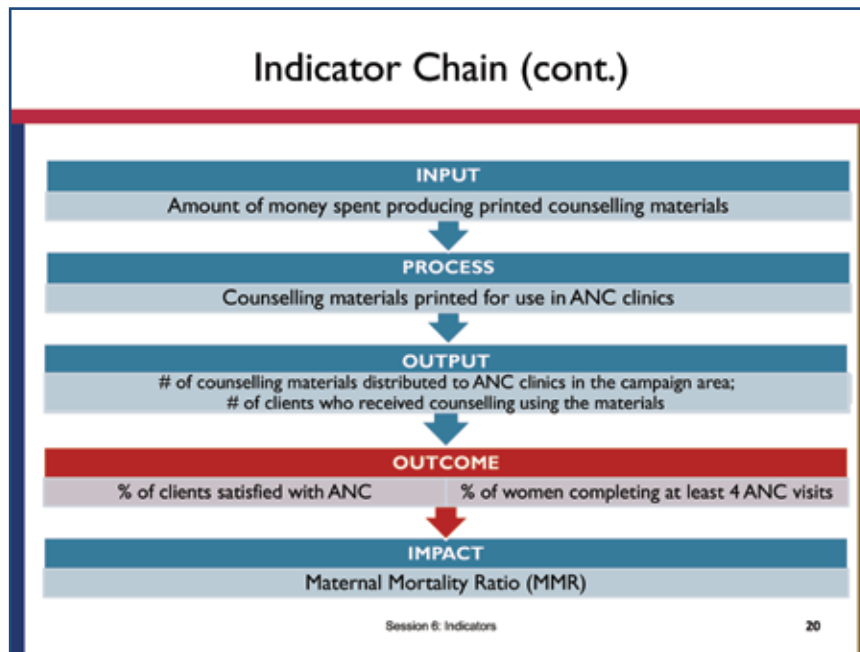
- Preparation: Before the activity begins, cut up a few postcards or pictures into puzzle pieces—enough for one puzzle piece per participant. Place the puzzle pieces into a bag.
- Explain that each participant will grab a piece of the puzzle from a bag. Participants will keep their puzzle piece to themselves until you say, “GO!” Then, the participants will try to locate other members of the group who have the connecting pieces to form the appropriate picture or postcard. Whichever group does it first, wins. Prizes (e.g., a candy bar, a pen) are optional.



Session 6: Indicators (continued)

1 hour and 40 minutes

- Before continuing with the slides for Session 6, give a brief summary of the concepts that were covered in the first part of the session.



Slide 6.20: Indicator Chain (continued)

2 minutes

- Explain that you will now go into greater depth about outcome indicators.
- Point out again that input indicators feed into process, process indicators feed into output, output indicators feed into outcome, and outcome indicators feed into impact, as shown in the ANC example.
- Ask participants:
 - How would you define outcome indicators?

Outcome Indicators

- **Outcome indicators measure intermediate or long-term factors at the population level.**
 - Should be defined by the communication and behavioural objectives of the campaign.
 - What do you want people to do as a result of your campaign?
 - How would you like knowledge, attitudes, or behaviours to change?

Session 6: Indicators 21

Slide 6.21: Outcome Indicators

5 minutes

- Explain that outcome indicators measure the intermediate and long-term, or behavioural, factors of a project or campaign. Since these indicators are measured at the population level, they are reported as percentages.
- Note that outcome indicators answer questions like
 - What do you want people to do as a result of your campaign? (Sleep under a mosquito net? Wear a condom?)
 - How would you like knowledge, attitudes, and behaviours to change? (*Be more accepting of those with HIV? View ANC as necessary?*)
- Ask participants:
 - What are some examples of outcome indicators for a BCC campaign?
 - Examples:
 - Percentage of people who know how to use condoms correctly,
 - Percentage of people who have a favourable attitude towards family planning,
 - Percentage of women intending to give birth in a clinic,
 - Percentage of women receiving ANC, and
 - Percentage of pregnant women sleeping under a bednet.
- Remind participants that, when using proportions (such as a percentage) as indicators, you must define both your numerator and denominator.
- Explain that outcome indicators are frequently broken into intermediate and long-term indicators.
- Ask participants:
 - How would you define intermediate indicators?
 - What are some examples of intermediate indicators?

Intermediate Outcome Indicators

- Your campaign may not be long enough to reach the ultimate behavioural outcomes (such as the percentage of people using condoms).
- Another way to look at what you have accomplished is to look at the **short-term** or **intermediate** factors, which may change on the way to your goal.
- Intermediate outcome indicators measure things that frequently need to change **before** the behaviour itself changes.

Session 6: Indicators 22

Slide 6.22: Intermediate Outcome Indicators

2 minutes

- Explain that outcome indicators also include what are known as intermediate or short-term indicators. Participants may have other terms for them.
- Note that, while in the end your goal may be to increase the percentage of people using condoms, your campaign might not be long enough to move people that far along. So, another way to measure what your campaign has accomplished is to look at these intermediate or short-term factors.
- Point out that intermediate indicators measure factors that frequently need to change before the behaviour itself changes.
- Give some examples:
 - Percentage of people who know how to use condoms correctly,
 - Percentage of people who have a favourable attitude towards family planning, and
 - Percentage of women intending to give birth in a clinic.

Identifying Intermediate Indicators

- Indicators should be identified in the initial communications plan.
- M&E and programme staff must work together to develop the indicators.
- Indicators should be based on the objectives and messages of the campaign.

Session 6: Indicators 23

Slide 6.23: Identifying Intermediate Indicators

2 minutes

- Explain that intermediate indicators should be identified in the initial communications plan. It is very important for M&E staff and programme staff to work together on designing the intermediate indicators, as the indicators should be based on the objectives and messages of the campaign.
- Highlight that, unfortunately, not everything is always in the communications plan. Or, maybe the M&E person needs to explain some of these intermediate factors to a funder to show that the project will closely track how the campaign is being implemented as well as any changes that might be attributable to the campaign. It is important for participants to understand intermediate factors in case one of these situations comes up.

Finding the Right Intermediate Indicators

- Ask yourself
 - What **attitudes** need to change?
 - Which **skills** need to be learned?
 - Which **behaviours** must change before the target audience will be able to adopt the final desired behaviour?

Session 6: Indicators
24

Slide 6.24: Finding the Right Intermediate Indicators

3 minutes

- Remind participants that intermediate indicators measure short-term factors that are either necessary or helpful on the way to practising the desired behaviour. To understand how these indicators fit into project objectives and indicators, it can be helpful to ask yourself
 - What attitudes need to change?
 - Which skills need to be learnt?
 - Which behaviours (or pre-behaviours) must change before the target audience will be able to adopt the final desired behaviour?
 - For example, in order to use a bednet, a person first has to acquire one. In order to use a condom, a person may need to first acquire the condom and then discuss condom use with his or her partner.
- Ask participants:
 - What are some common intermediate indicators?
- Write the participant responses on a flipchart.

Common Intermediate Factors

- Knowledge
- Attitudes
- Self-efficacy
- Skills
- Saliency
- Perceived social norms
- Interpersonal communication
- Behavioural intent

Session 6: Indicators 25

Slide 6.25: Common Intermediate Factors

2 minutes

- Review the examples and compare them to the participant responses to the previous question.

Knowledge

- **Knowledge** is one of the most frequently used intermediate indicators. It measures whether people know certain information.
- For example:
 - Percentage of women who know signs of labour,
 - Percentage of youth aged 15–21 who know two ways HIV is transmitted, and
 - Percentage of men who know that a person can have HIV without looking sick.

Session 6: Indicators 26

Slide 6.26: Knowledge

2 minutes

- Explain that knowledge is one of the most frequently used intermediate indicators. It measures whether people know certain information.
- Go through each of the examples.

Beyond Knowledge

- **Knowledge alone does not necessarily change behaviour.**
- Many campaigns work in intervention areas where knowledge is **already** quite high.
- If knowledge starts out high, **you should target and measure change in other factors.**

Session 6: Indicators 27

Slide 6.27: Beyond Knowledge

2 minutes

- Explain that, although intermediate indicators do include knowledge, it is important to go beyond knowledge both when creating campaign objectives and when attempting to document what your campaign has accomplished.
- Highlight that there are a couple of reasons for this—the first is that knowledge alone does not necessarily change behaviour. The second is that it is entirely possible that your campaigns will be working in intervention areas where knowledge is already quite high. In that case, you should be aiming for and measuring change in other factors.
- Ask participants:
 - Beyond knowledge, what are some important intermediate factors for a BCC campaign?
- Write the participant responses on a flipchart.

Attitudes

- **Attitude** is defined as a person's opinion (positive or negative) of a behaviour, product, practice, service, or other person.
- Attitudes are sometimes referred to as "beliefs."
- For example:
 - Percentage of women aged 15–24 who believe that family planning helps a woman regain her strength before having her next baby;
 - Percentage of men who believe that family planning encourages a wife to become promiscuous; and
 - Percentage of women who feel they are treated respectfully at ANC visits.

Session 6: Indicators 28

Slide 6.28: Attitudes

1 minute

- Explain that attitudes are people's opinions (positive or negative) of a behaviour, product, practice, service, or other person.
- Note that attitudes are sometimes referred to as beliefs.

Self-Efficacy

- **Self-efficacy** measures how strongly a person believes he or she could do a certain behaviour.
- For example:
 - Percentage of youth aged 15–21 who believe they could bring up the subject of HIV testing with their current partner(s).
- If a person does not think that he or she could do it, or does not have the skills to do it, that person will most likely **not** do it.

Session 6: Indicators 29

Slide 6.29: Self-Efficacy

1 minute

- Point out whether this indicator was or was not part of the participant responses to the questions on slide 6.24 and 6.27.
- Explain that self-efficacy measures how strongly a person believes he or she could do a certain behaviour, such as a young adult feeling confident that he or she can talk about HIV testing with a current partner.
- Explain that, if a person does not think that he or she could do it, that person most likely will *not* do it.

Skills

- **Skills** refers to whether a person has the skills and abilities necessary to perform the desired behaviour in different circumstances.
- It may take some skill to perform a certain behaviour (such as negotiating condom use or breastfeeding a baby).
- For example:
 - Percentage of men who know how to use a condom correctly.

Session 6: Indicators 30

Slide 6.30: Skills

1 minute

- Point out whether this indicator was or was not part of the participant responses to the questions on slides 6.24 and 6.27.
- Explain that skills refer to whether a person has the skills and abilities necessary to perform the desired behaviour in different circumstances.
- Explain that it may take some skill to perform a certain behaviour (such as wearing a condom, negotiating condom use, or breastfeeding a baby). If a person does not have the skill to perform the behaviour, that person most likely will not do that behaviour.

Saliency

- **Saliency** is how important an issue is to an audience.
- It is possible that for some topics there is high awareness of an issue (knowledge is high), but the topic may not seem important or people may not feel personally at risk.
 - For example: The percentage of pregnant women who believe that it is important for them to give birth in a health facility.
 - [They might know it's a good idea, in general, but feel that it's not very important for them personally.]

Session 6: Indicators 31

Slide 6.31: Saliency

1 minute

- Point out whether this indicator was or was not part of the participant responses to the questions on slide 6.24 and 6.27.
- Explain that saliency refers to how important an issue is to an audience. It is possible that, for some topics, there is high awareness of an issue (knowledge is high), but the topic may not seem important to them, or people may not feel personally at risk.

Perceived Social Norms

- **Perceived social norms** are what people understand to be the standards of acceptable attitudes and behaviours. This can be amongst a person's peer group or amongst those people important to that person.
- For example:
 - Who would approve (or disapprove) if I do x?
 - Do others think it's a good thing if I do this?
 - Will I be looked at as a good mother if I do this, or will it reflect poorly on me?

Session 6: Indicators 32

Slide 6.32: Perceived Social Norms

2 minutes

- Point out whether this indicator was or was not part of the participant responses to the questions on slides 6.24 and 6.27.
- Explain that perceived social norms are the standards of acceptable attitudes and behaviours amongst a person's peer group or amongst those people important to that person. For example, to understand the social norms of the audience to whom the campaign is targeted, planners should ask themselves the following questions from the point of view of the target audience (or better yet, do formative research with that audience!): "Do others think it's a good or bad thing if I do this?" "Who would approve (or disapprove) if I do X?"

Interpersonal Communication

- **Interpersonal communication** looks at whether people talk about a subject with someone else. Behaviours frequently need to be discussed or negotiated before they can be acted upon.
- For example:
 - Percentage of women aged 15–40 who have discussed family planning with a service provider in the past 6 months.

Session 6: Indicators 33

Slide 6.33: Interpersonal Communication

2 minutes

- Point out whether this indicator was or was not part of the participant responses to the questions on slides 6.24 and 6.27.
- Remind participants that behaviours frequently need to be discussed or negotiated before they can be acted upon.
- Note that finding out whether people are starting to have these conversations can be important in assessing whether your communications project is beginning to make a difference by getting people to talk about the subject.
 - Example: Percentage of women aged 15–40 who have discussed family planning with a service provider in the past 6 months.
 - Another example: Percentage of men who have talked with a spouse or friend about being tested for HIV.

Behavioural Intent

- **Behavioural intent** is a measure of the likelihood that a person will engage in a specific behaviour. Does he or she plan to do x?
- There is a strong predictive relationship between people's **intentions** to perform a behaviour and whether they actually perform it.
- For example:
 - Percentage of pregnant women who intend to give birth in a health facility.

Session 6: Indicators 34

Slide 6.34: Behavioural Intent

5 minutes

- Point out whether this indicator was or was not part of the participant responses to the questions on slides 6.24 and 6.27 (participants' response to the question, *Beyond knowledge, what are some important intermediate factors for a BCC campaign?*).
- Explain that behavioural intent is a measure of the likelihood that a person will engage in a specific behaviour. There is a strong predictive relationship between people's intentions to perform a behaviour and whether they actually perform it.
- Ask participants:
 - What are some examples of these types of intermediate indicators:
 - Knowledge?
 - Saliency?
 - Self-efficacy?
 - Skills?
 - Perceived social norms?
 - Behavioural intent?
- Note to facilitator: Write the responses on a flipchart. Use three different sheets of flipchart paper and create two columns on each sheet to organise the responses. For example, one sheet would have a column for knowledge and another column for saliency.

Exercise: Intermediate Indicators

- **Which issue do the following indicators address?**
 - % of mothers who are concerned that their children are at risk of malnutrition;
 - % of sexually active young people aged 15–24 who feel they could negotiate condom use with a partner;
 - % of mothers who believe that exclusively breastfeeding their baby shows that they want only the best for their baby; and
 - % of men who believe that the use of family planning promotes promiscuity.

Session 6: Indicators 35

Slide 6.35: Exercise: Intermediate Indicators

3 minutes

- Explain that for this exercise, participants will have 3 minutes to work by themselves—not with their teams—to determine which type of indicator each example is (i.e., knowledge, saliency, self-efficacy, skills, perceived social norms, or behavioural intent).
 - Percentage of mothers who are concerned that their children are at risk of malnutrition: Saliency,
 - Percentage of sexually active young people aged 15–24 who feel they could negotiate condom use with a partner: Self-efficacy,
 - Percentage of mothers who believe that exclusively breastfeeding their baby shows that they want only the best for their baby: Perceived social norms, and
 - Percentage of men who believe that the use of family planning promotes promiscuity: Attitudes.

Exercise: Intermediate Indicators (cont.)

- Which issue do the following indicators address?
 - % of mothers/caretakers who intend to use ITN to prevent malaria;
 - % of surveyed population that knows three primary warning/danger signs during pregnancy;
 - % of mothers who are able to prepare healthy foods for their children; and
 - % of women who have discussed condom use with their current partner or partners.

Session 6: Indicators 36

Slide 6.36: Exercise: Intermediate Indicators (continued)

13 minutes

- Give participants another 3 minutes to work by themselves, not with their teams, to determine which type of indicator each example is (i.e., knowledge, saliency, self-efficacy, skills, perceived social norms, or behavioural intent).
- Allow 10 minutes to go over the answers from this slide and the previous one. Ask participants to raise their hands to say the type of indicator they think each example is.
- Go through each of the questions for an example, then tell the group what type of indicator the example is. Do NOT wait until you go through all of the examples to provide the answers for each of the following:
 - Percentage of mothers/caretakers who intend to use ITN to prevent malaria: Behavioural intent,
 - Percentage of the surveyed population that knows three primary warning/danger signs during pregnancy: Knowledge,
 - Percentage of mothers who are able to prepare healthy foods for their children: Skills, and
 - Percentage of women who have discussed condom use with their current partner or partners: Interpersonal communication.

Long-Term Outcome Indicators

- **Long-term indicators** are sometimes called **behavioural indicators**. They measure what proportion of the population is doing a certain behaviour.
- For example:
 - Percentage of pregnant women receiving a full course of IPTp, and
 - Percentage of men reporting only one sexual partner in the past month.

Session 6: Indicators 37

Slide 6.37: Long-Term Outcome Indicators

1 minute

- Explain that long-term indicators are sometimes called behavioural indicators. They measure what proportion of the population is doing a certain behaviour.
- Mention that some examples include the percentage of pregnant women receiving a full course of IPTp and the percentage of men reporting only one sexual partner in the past month.

Short- or Long-Term?

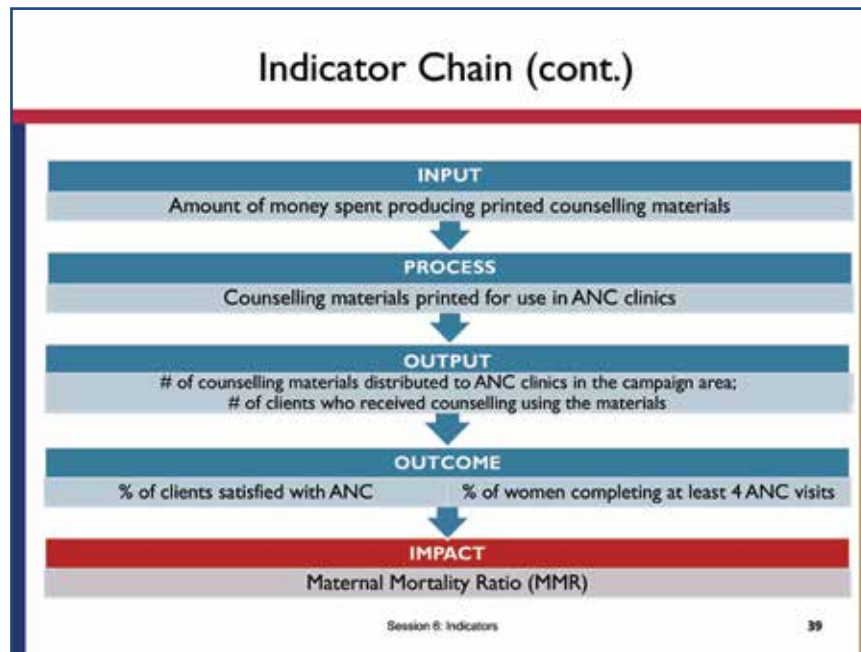
- BCC campaign objectives (and BCC outcome indicators) should include both intermediate **and** long-term outcomes.
- Intermediate outcomes usually show changes first.
- If you can show changes in the intermediate (short-term) objectives, you have evidence of some impact, even if your long-term indicators do not yet show change.

Session 6: Indicators 38

Slide 6.38: Short- or Long-Term?

2 minutes

- Explain that BCC project objectives (and therefore BCC outcome indicators) should include both the intermediate and long-term outcomes because the intermediate ones are usually affected first.
- Explain that, if you can show changes in short-term objectives, you have evidence of some impact, even if your long-term indicators do not yet show change.



Slide 6.39: Indicator Chain (continued)

2 minutes

- Explain that you will now go into greater depth about impact indicators.
- Point out again that outcome indicators feed into impact, as shown in the ANC example.
- Ask participants:
 - How would you define impact indicators?
- Write the participant responses on a flipchart.

Impact Indicators

- **Impact indicators** are related to impact on actual health status, such as HIV prevalence or maternal mortality.
- Most projects do not measure them (requires special studies with wide coverage and large budgets).
- **Outcome measures** are used as proxies for impact.
- Use the DHS when you can!

Session 6: Indicators 40

Slide 6.40: Impact Indicators

1 minute

- Explain that impact indicators are related to impact on actual health status, such as HIV prevalence or maternal mortality. Most projects and campaigns do not usually measure this, since this type of evaluation requires special studies with wide coverage and large budgets. Because of this, outcome measures are used as proxies for impact.
- Note that if your campaign is timed to be able to take advantage of a large-scale study, such as a Demographic and Health Survey (DHS), and you are able to include questions about exposure to your campaign in that survey, then that data can be used. Even if you cannot insert campaign exposure questions into the survey, you can still use DHS health status data to illustrate trends in health status.

Outcome vs. Impact	
Outcome Indicator	Impact Indicator
<ul style="list-style-type: none">• Percentage of people using condoms,	<ul style="list-style-type: none">• Prevalence of HIV,
<ul style="list-style-type: none">• Percentage of mothers giving birth in a clinic, and	<ul style="list-style-type: none">• Maternal mortality, and
<ul style="list-style-type: none">• Percentage of children under age 5 sleeping under a mosquito net.	<ul style="list-style-type: none">• Malaria-related child mortality.

Session 6: Indicators 41

Slide 6.41: Outcome vs. Impact

2 minutes

- Go over each of the differences. For example, the outcome indicator is the percentage of people using condoms; the impact indicator is the prevalence of HIV.

Scenario Exercise: Outcome and Impact Indicators

- Identify the intermediate and behavioural outcomes AND the impact indicators for your HIV/AIDS campaign, and
- Pick two of each kind of indicator.

Session 6: Indicators 42

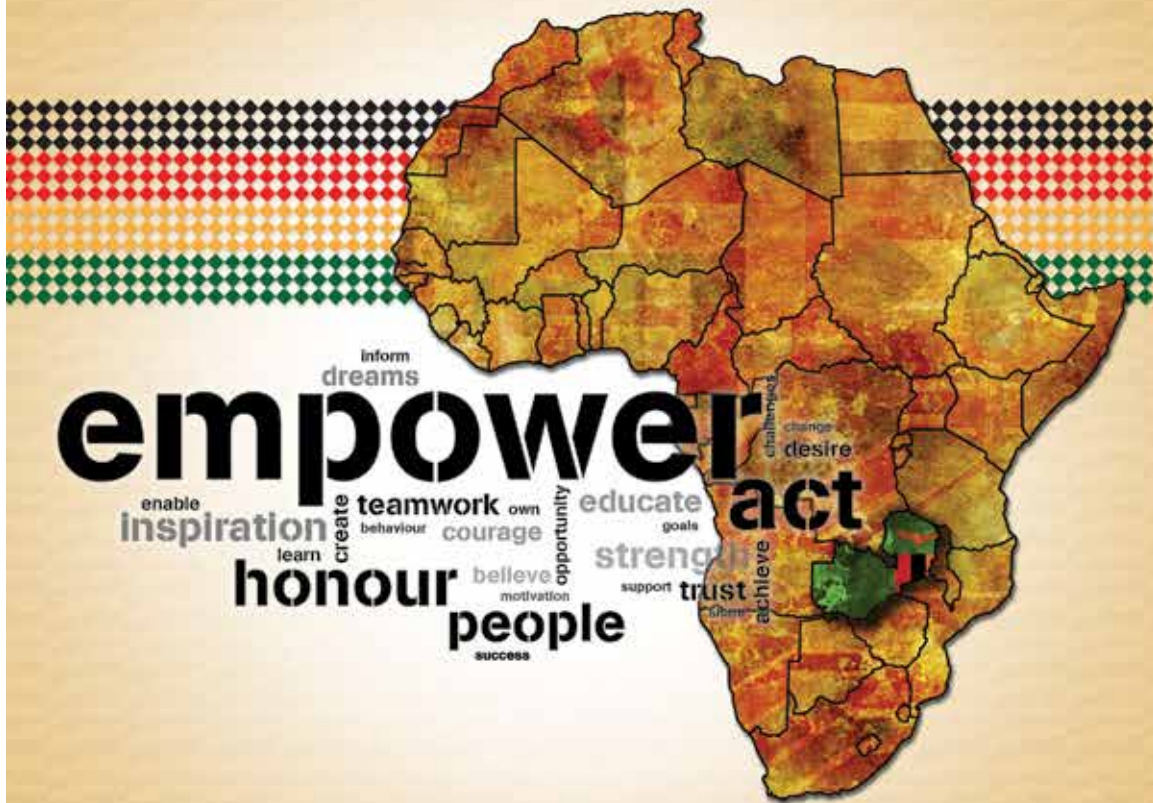
Slide 6.42: Scenario Exercise: Outcome and Impact Indicators

40 minutes

- Ask each team to spend 20 minutes identifying two examples each of outcome and impact indicators for the same national and community-level activities in their assigned component (MCP or MTCT) of the HIV/AIDS campaign that they used for the last scenario exercise.
- Remind participants that their *Participant's Guide* also includes a handout on page 166 on which they can write their indicators, as a reference to use after the training.
- Allow 20 minutes for the teams to present their indicators and for the group discussion.

Tea Break

SESSION 7



Session 7: Data Collection



1 hour and 50 minutes

Session Objectives	<ul style="list-style-type: none"> • Identify potential methods and data collection tools for monitoring BCC campaigns • Identify existing data sources for evaluating BCC campaigns • Create a data collection plan
Methods	<ul style="list-style-type: none"> • Lecture • Group discussion • Exercise • Scenario exercise
Materials	<ul style="list-style-type: none"> • Flipchart • Markers

KEY DISCUSSION POINTS

- Explain that this session provides an overview of the different types of data collection methods commonly used to gather routine monitoring and evaluation data for BCC campaigns.
- Note that it is important to take into consideration some of the following factors when thinking about what data to collect and how to collect it when developing the data collection plan, including:
 - How often does someone need to collect the data?
 - How feasible is it to collect the data?
 - How many resources (human and financial) will be needed to collect the data?



Slide 7.1: Data Collection

1 minute

- Explain that this session will address data sources and collection for M&E of BCC campaigns.

Objectives

- Participants will be able to
 - Identify potential methods and data collection tools for monitoring BCC campaigns,
 - Identify existing data sources for evaluating BCC campaigns, and
 - Create a data collection plan.

Session 7: Data Collection **2**

Slide 7.2: Objectives

1 minute

- Ask one of the participants to read each of the objectives.
- Ask participants:
 - Does anyone have any questions before we begin with the session?

Data Collection

- Data collection is the process of gathering data about the various activities related to your campaign that are relevant to your M&E framework,
- Collection involves getting data for analysis using various tools, and
- Data are collected using
 - Questionnaires
 - Interviews
 - Observation
 - Existing records

Session 7: Data Collection 3

Slide 7.3: Data Collection

2 minutes

- Explain that data collection is the process of gathering data about the various activities relevant to a campaign's M&E framework.
- Explain that you collect data from the original source and transfer them into other tools to be analysed, or you use tools to gather data to be analysed.
- Explain that data for BCC campaigns are commonly collected using questionnaires, interviews, observation, and existing records.

Planning for Data

- Both monitoring and evaluation depend on data.
- It is best to think about data sources and data collection at the *beginning* of the campaign.
- Any necessary budgets or data collection forms should be included in the M&E plan.

Session 7: Data Collection 4

Slide 7.4: Planning for Data

1 minute

- Stress that planning for data collection and the sources needs to happen at the beginning of a campaign. Any necessary budgets or tracking forms should be included in the M&E plan.

Your Perspective

- Where do data for M&E come from?
- What are your methods/sources for monitoring?
- What are your sources for evaluation?

Session 7: Data Collection 5

Slide 7.5: Your Perspective

3 minutes

- Ask participants:
 - Where do your data for M&E come from?
 - For monitoring?
 - For evaluation?
 - For both?

Routine Tracking for Monitoring

- Decide with campaign implementers which activities will be monitored and which indicators will be collected.
 - Who will collect the data?
 - When? How frequently?
 - What tools will be used to collect and record information?
 - Who will receive updates on indicators? How frequently?
 - Where will information be stored?

Session 7: Data Collection 6

Slide 7.6: Routine Tracking for Monitoring

3 minutes

- Explain that it is important to agree with campaign implementers from the beginning on which implementation output indicators will be collected and tracked routinely and by whom. This will help to ensure that the data collected are useful to those in charge of implementing the campaign.
- Explain that the questions on the slide need to be answered before the campaign is implemented. This discussion and decision-making should be done with the technical and M&E teams together so that everyone agrees on what would work best to ensure that the project functions smoothly. In some cases other stakeholders will be involved as well, particularly if the campaign is implemented by multiple partners.
- Note that once processes are determined, tools for collecting and recording the information will need to be developed.
- Explain that updates on the indicators should be provided in frequent progress reports (usually monthly) and can be stored in a tracking database and analysed.
- Highlight that descriptive qualitative information about the implementation of the campaign, including reasons why it may not have occurred as intended, should also be included in the reports.

Activities Drive the Method

- **Mass media**
 - **Implementation data**
 - Media monitoring company, and
 - Monitoring calendar completed by community or project staff.
 - **Reach/exposure data**
 - Media monitoring company, and
 - Rapid household survey (exposure).

Session 7: Data Collection 7

Slide 7.7: Activities Drive the Method

3 minutes

- Explain that the type of activities you are implementing in your campaign will dictate how you will collect your M&E data.
- Explain that, when using mass media like radio or television, you have a couple of options for collection methods and sources.
- Note that, for implementation data such as the frequency in which an advertisement is aired, you can either use a media monitoring company or a monitoring calendar that is completed by community or project staff.
- Explain that, to determine how many people have been reached by or exposed to a mass media product, you can use a media monitoring company. To determine just the number of people exposed to the product, you can use a rapid household survey.

Media Monitoring Company

- A professional media monitoring company monitors when campaign productions are broadcast (output indicators/implementation data).
- **Pros:** Consistent quality data, reliable.
- **Cons:** Can be costly and have recurring (rather than a one-time) cost; media companies may not be able to monitor community-level radio.
- Ideal for programmes or public service announcements that are broadcast irregularly or on multiple channels.

Session 7: Data Collection 8

Slide 7.8: Media Monitoring Company

2 minutes

- Explain that a professional media monitoring company can monitor when campaign productions are broadcast. These companies are ideal for programmes or public service announcements (PSAs) that are on the air irregularly or on multiple channels.
- Mention that these companies can provide consistent quality data and are normally reliable. BUT they can be costly, especially when the programme or PSA occurs multiple times.
- Ask participants:
 - What have your experiences been with media monitoring companies? How have they differed from these points?

Community Monitoring

- Community members can tune into broadcasts and mark on calendars when they hear the programme.
- **Pros:** Inexpensive, increases community involvement.
- **Cons:** Can be unreliable, requires community training and records collection.
- Ideal for programmes broadcast at regular times on one or two channels.

Session 7: Data Collection 9

Slide 7.9: Community Monitoring

3 minutes

- Note that an alternative approach is to engage members of the community to monitor the broadcasts by providing them with a simple tool, such as a monitoring calendar, to record the days and times when the programme is aired. It may be more feasible to conduct random spot checks of the broadcasts.
- Highlight that this approach is inexpensive and increases community involvement. However, it can be unreliable and requires community training and regular follow-up.
- Explain that this is ideal for programmes that broadcast on a regular basis and are on a couple of channels.
- Ask participants:
 - What have your experiences been with community monitoring? Do you agree with these points?

Sample Monitoring Calendar

Radio Monitoring Calendar January 2013

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

For every day that you hear the radio show at the scheduled time, please mark an "X" next to the date.

Radio Schedule:

[Days]

At [Time]

In the case that you do not hear the show at the scheduled time, please immediately call the number below:

XXXX-XXXXX
10

Session 7: Data Collection

Slide 7.10: Sample Monitoring Calendar

1 minute

- Point out that this is an example of a radio monitoring calendar.
- Explain that you can ask community members to tune into broadcasts and mark on their calendars when they heard the programme.
- Explain that the calendar provides community members with some directions at the bottom and the side, but community members will need to be trained on how to use the calendar, and the campaign management will also need to be clear on who will collect the calendars from community members and how often.

Monitoring Reach and Exposure

- **Reach:** The number or proportion of people who potentially could be exposed to your message or campaign based on their access to the media used in your campaign.
 - This can be determined by a media monitoring company or by staff research into the media used in your campaign.
- **Exposure:** Percentage of people who have seen or heard your message or campaign.
 - This is best determined by a rapid household survey.

11

Slide 7.11: Monitoring Reach and Exposure

3 minutes

- Explain that one approach to monitoring the campaign coverage is to look at *reach* and *exposure*.
- Point out that these two concepts are sometimes used interchangeably, but they are not quite the same thing.
 - Reach looks at the number or proportion of people who could be exposed to your ad, for example, in a newspaper. The newspaper may have a circulation of 10,000, for instance. Unfortunately, that does not necessarily mean that 10,000 people saw your ad.
 - Exposure looks at the percentage of people who actually saw the ad or heard the message. To determine this, you need to use a rapid household survey.
- Ask participants:
 - How many of you have ever worked with a rapid household survey?

Rapid Household Survey

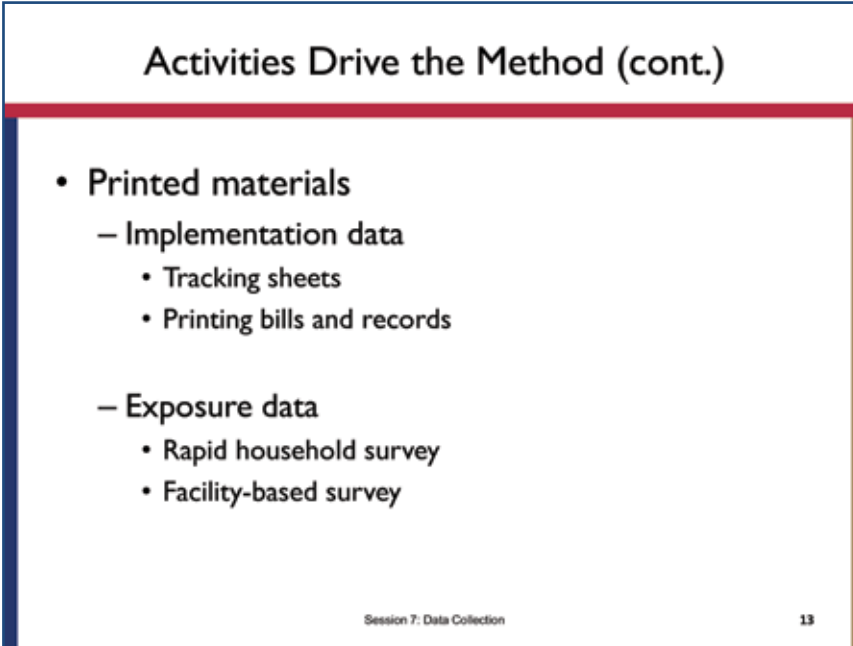
- A rapid household survey uses a small sample size in which individual surveys can be conducted in 15 minutes or less.
- “Small sample” can be difficult to define and may change depending on the reach of your campaign.
- Rapid household surveys aim to collect results quickly using minimal resources.

12

Slide 7.12: Rapid Household Survey

2 minutes

- Explain that a rapid household survey is a survey using a small sample size in which individual surveys can be conducted in 15 minutes or less.
- Note that “small sample” is difficult to define, and it could change depending on circumstances. A small sample could be as small as 19 per district or enumeration area, depending on your methodology. Sample size could change depending on the reach of your campaign and how many different groups, regions, or areas you want to sample.
- Point out that rapid household surveys aim to collect results quickly using minimal resources.



The slide is titled "Activities Drive the Method (cont.)" and is framed with a blue border and a red horizontal line. It contains a bulleted list of activities and their associated data collection methods. At the bottom, it includes the text "Session 7: Data Collection" and the number "13".

- **Printed materials**
 - **Implementation data**
 - Tracking sheets
 - Printing bills and records
 - **Exposure data**
 - Rapid household survey
 - Facility-based survey

Session 7: Data Collection 13

Slide 7.13: Activities Drive the Method (continued)

1 minute

- Note again that you will need to select your monitoring method depending on what activities your campaign is doing. For example, when using printed materials in your campaign, you can use implementation data such as tracking sheets and printing bills or records to monitor how much you've printed and distributed.
- Explain that to determine how many people were exposed to the printed materials your campaign produced, you will need to conduct a rapid household survey or a facility-based survey.

Activities Drive the Method (cont.)

- **Outreach**
 - **Interpersonal (counselling and testing, one-on-one interaction between provider/patient)**
 - Tracking forms
 - Facility-based survey (exit interview)
 - Observation
 - **Festivals and community events**
 - Tracking forms
 - Sign-up sheets
 - Rapid household survey

Session 7: Data Collection 14

Slide 7.14: Activities Drive the Method (continued)

2 minutes

- Explain that, for outreach activities, you can use several methods for collecting data on interpersonal activities, including tracking forms, exit interviews, and observations.
- Explain that data on community events could be collected using tracking forms, sign-up sheets, or perhaps even a rapid household survey.
- Ask participants what methods they have used to monitor interpersonal interactions or community events.

Observations

- Observations during random visits or spot checks to the field can verify that activities are implemented as intended.
- A simple checklist can be used to guide the visits.
- Frequency and location of the visits is based on the campaign.

Session 7: Data Collection

15

Slide 7.15: Observations

1 minute

- Explain that conducting observations during random visits or spot checks to the field can verify that the activities are indeed being implemented as intended.
- Note that a simple observation checklist can be used to guide the visits and collect the required information related to implementation. The frequency and location of the visits will be determined based on each particular campaign.

Sample Observation Guide or Checklist

Observation Checklist for Community Event

1. How many people are present at the event?
2. Did the role-play take place as intended?
3. Can the audience members easily see the people on the stage?
4. Can the audience members easily hear the people on the stage?
5. Did the main character clearly communicate the health message as intended?
6. How well did the audience engage with the presentation?
 - a) Did the presentation hold the attention of most people? Y N
 - b) Did most people stay for the entire presentation? Y N

Session 7: Data Collection 16

Slide 7.16: Sample Observation Guide or Checklist

1 minute

- Explain that this example shows common observation questions for community events, including audience engagement and size.

Scenario Exercise: Observation Guide

- Your project has decided to create an observation guide based on your scenario activities.
 - What event will you observe?
 - What will be on your observation guide?
 - Who will use the observation guide?
 - What will they do with the information?

Session 7: Data Collection 17

Slide 7.17: Scenario Exercise: Observation Guide

30 minutes

- Distribute a piece of flipchart paper and markers to each team.
- Tell participants they will be creating an observation guide for one of their scenario activities. Ask participants to look through their scenario and decide which activity they would like to observe for either the MCP or MTCT components of their HIV/AIDS campaign.
- Tell them that they need to answer and write down their responses to the following questions:
 - What activity will your team be monitoring?
 - What will be on the guide?
 - Who will use the guide?
 - What will they do with the information?
- Allow participants to work on this exercise for 15 minutes.
- Allow 15 minutes for the teams to present their answers and for the group to discuss them.
- Tell participants that they can use the space on page 168 in their *Participant's Guide* to record their plans. The plans can be a reference they can review after the training.
- Ask for a volunteer or volunteers to provide a short (5–6 minute) review of today's sessions at the start of the training tomorrow morning.

End of Day Two Sessions

Administrative Task 5:



Day Two Evaluation

Time: 15 minutes

Process:

1. Remind participants that the purpose of the daily evaluation is to gather feedback on Day Two of the training. Remind participants that the training team will meet in the evening to discuss the daily evaluations and will make decisions to alter the training for the following days, as feasible.
2. Distribute the daily evaluation forms.
3. Tell participants that they will have 5 minutes to complete the form.
4. Remind participants not to write their names on the form.
5. Ask participants to turn their forms face down when completed.
6. Collect all completed forms and store them to review later.

Materials:

- Daily evaluation forms
- Pens or pencils

DAY THREE



Administrative Task 6:

Day Three Reporting

Time: 10 minutes

Process:

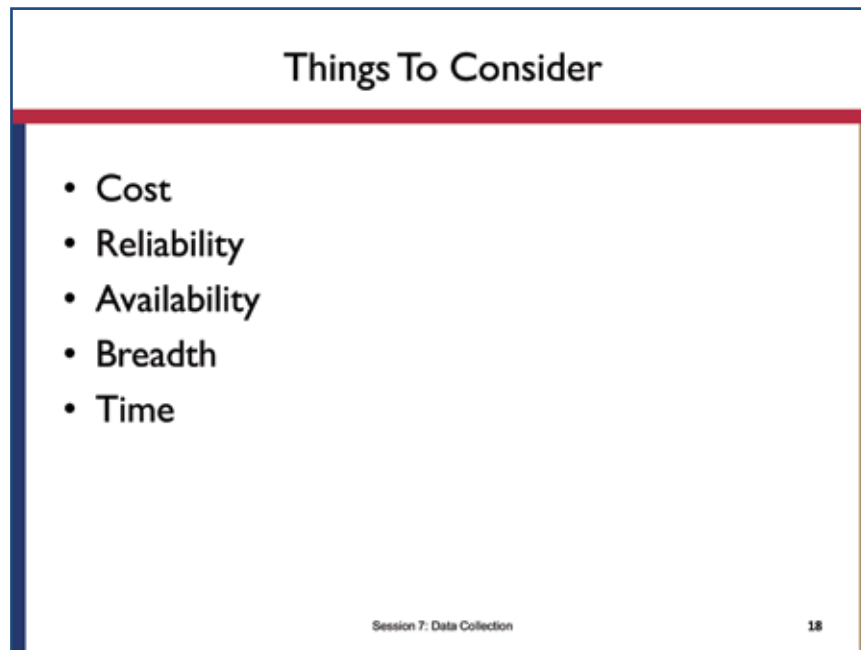
1. Remind participants that the purpose of the daily reporting is to summarise what the group discussed the day before.
2. Ask the participant who volunteered yesterday to come up to the front of the room and provide the daily report.
3. Ask the other participants if there is anything they would add to the report.



Session 7: Data Collection (continued)

50 minutes

- Before continuing with the slides for Session 7, give a brief summary of the concepts that were covered in the first part of Session 7.



Slide 7.18: Things To Consider

3 minutes

- Explain that, when planning for your data collection, you need to consider several factors, including
 - Cost of data collection methods and your M&E budget.
 - Likely reliability of methods.
 - Likely availability of certain methods. For example, would the community be available to monitor your campaign activities during a specific time period?
 - Breadth of or how detailed the information is that you are looking for.
 - Time; this includes time that you and the campaign team will have and need to dedicate in coordinating these collection methods.
 - How long it takes to collect data, and
 - How frequently you would need to collect data to be useful for programme management.
- Ask participants:
 - What data sources could be used in the evaluation of a BCC campaign?

Data Sources for Evaluation

- **Secondary data sources**
 - Existing national or large-sample surveys such as DHS, and
 - HMIS or other routine outcome databases.
- **Primary data collection (methods will depend on evaluation design chosen)**
 - Representative household survey
 - Facility-based survey
 - Qualitative research

Session 7: Data Collection 19

Slide 7.19: Data Sources for Evaluation

1 minute

- Explain that secondary data sources could be used, including existing large surveys such as the DHS and Health Management Information System or other routine outcome databases.
- Explain that primary data collection methods would depend on the evaluation design, but some might include a representative household survey, facility-based survey, or qualitative research.

Data Quality

- **Why is it important?**
 - You want to know that the results you are getting are reflective of reality and you are not wasting time or money.
 - Accountability is increasingly important for funding.

Session 7: Data Collection 20

Slide 7.20: Data Quality

2 minutes

- Mention that there won't be enough time in the training to review the different methods for ensuring quality data, but that we'll review some important elements that should be considered for ensuring data quality.
- Explain that you want your data management system to reflect the real world. You should think of data as the lens through which you see the real world. Stress that poor-quality data distorts the view, while data that is of good quality gives a sharp, focused picture of what's actually happening with the campaign.
- Stress that accountability of the collection of accurate data is very important to funders and should be taken seriously.

Dimensions of Data Quality	
Validity	Valid data are considered <i>accurate</i> : They measure what they are intended to measure.
Reliability	The data are measured and collected consistently.
Completeness	Data are completely inclusive: An information system represents the <i>complete</i> list of eligible names and not a fraction of the list.
Precision	The data have sufficient detail.
Timeliness	Data are up-to-date (current), and information is available on time.
Integrity	The data are protected from deliberate bias or manipulation for political or personal reasons.

Session 7: Data Collection 21

Slide 7.21: Dimensions of Data Quality

5 minutes

- Explain that there are several key dimensions to ensuring data quality:
 - Validity: Are the metrics measuring what they are supposed to in order to tell us what we need to know?
 - Reliability: Have data been measured and collected consistently? For example, if you are collecting data across different sites, are you collecting them in the same way and will you get the same result over time?
 - Completeness: Has everything that needs to be captured been captured?
 - Precision: Do you need to know how old a person is in number of years, months, weeks, days, hours, minutes, or seconds, or another timeframe?
 - Timeliness: Are data up to date and available on time?
 - Integrity: Have you ensured that we are not changing our data to fit a hypothesis?
- Mention that a list of resources, including materials on data quality, is in their booklets for their reference after the training.

Scenario Exercise: Data Collection Plan

- Write a data collection plan outline for monitoring your activities. Be sure to include the following:
 - What activities will you monitor?
 - What methods and sources will you use for monitoring?
 - How would your plan change if you were given a large budget (or a sudden budget cut)?

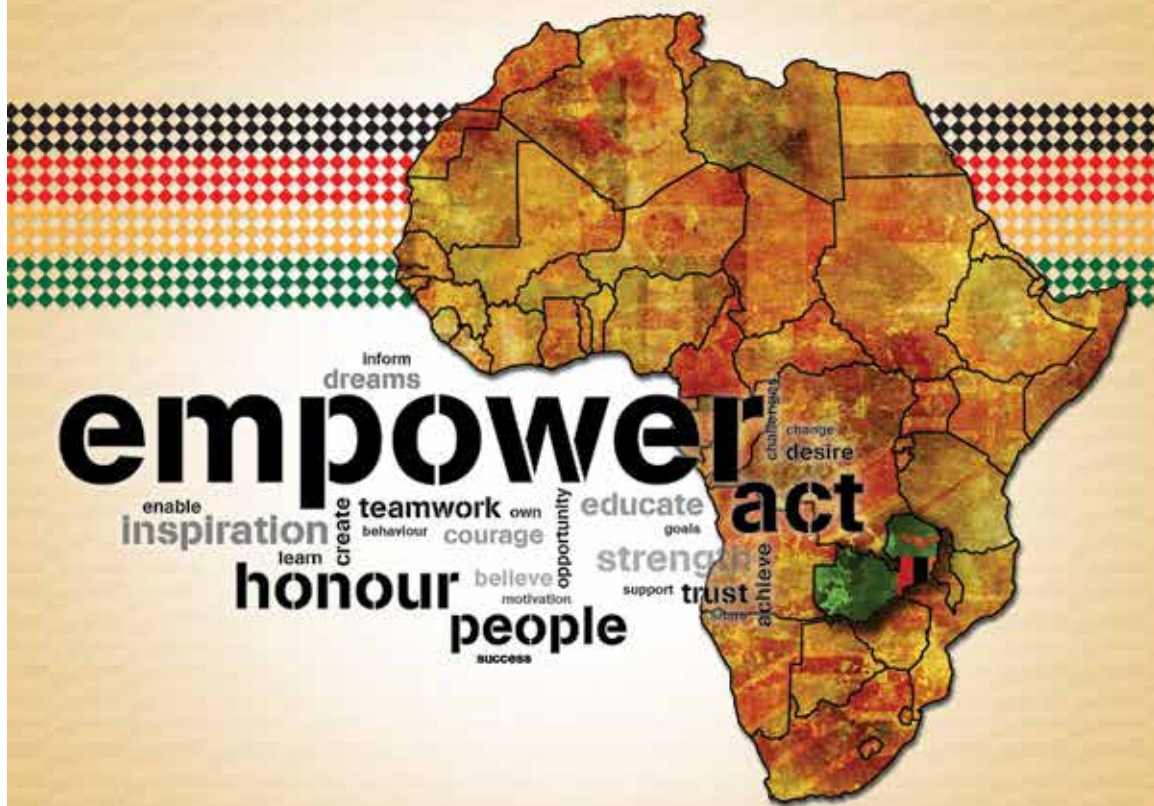
Session 7: Data Collection 22

Slide 7.22: Scenario Exercise: Data Collection Plan

40 minutes

- Ask each team to outline a data collection plan for the team’s activities for the MCP or MTCT components of its HIV/AIDS campaign. Ask the teams to select half of their members to work on national-level activities and the other half to work on activities at the community level.
 - Note that this is a data collection plan for *monitoring* your campaign, not evaluating it. However, data for monitoring and evaluating your campaign are likely to overlap some.
- Hand two pieces of flipchart paper to each team—one for national and one for community-level activities.
- Tell participants that they can use the chart on page 169 in their Participant Guide to record their plans. This can be a reference they can review after the training.
- Allow 20 minutes for the teams to outline their plans.
- Allow 20 minutes for the teams to report their plans to the group.

SESSION 8



Session 8: Evaluation Design



90 minutes

<p>Session Objectives</p>	<ul style="list-style-type: none"> • Discuss the three main categories of evaluation design • Identify three types of quasi-experimental designs • Select an appropriate evaluation design for a BCC campaign
<p>Methods</p>	<ul style="list-style-type: none"> • Lecture • Group discussion • Scenario exercise
<p>Materials</p>	<ul style="list-style-type: none"> • Flipchart • Markers • Pre-prepared index cards that list complicating factors for the scenario exercise in slide 20

KEY DISCUSSION POINTS

- Explain that this session is a very broad overview of evaluation designs that are most commonly used for evaluating BCC campaigns.
- Stress that there are many factors that one needs to consider when deciding on the most appropriate evaluation design for a BCC campaign. These factors include, for example, what evaluation questions staff want to have answered, what data is available or feasible to collect for the evaluation, whether there is a comparison or control group available for the evaluation, and how much time and resources are available for the evaluation.
- Stress the importance of planning for the evaluation of the BCC campaign from the very beginning of when staff begin designing the campaign.



Slide 8.1: Evaluation Design

1 minute

- Explain that the session will provide a basic review of the different types of evaluations for BCC campaigns.
- Mention that the session won't go into analysis approaches, but there is a supplemental session for those who are interested.

Objectives

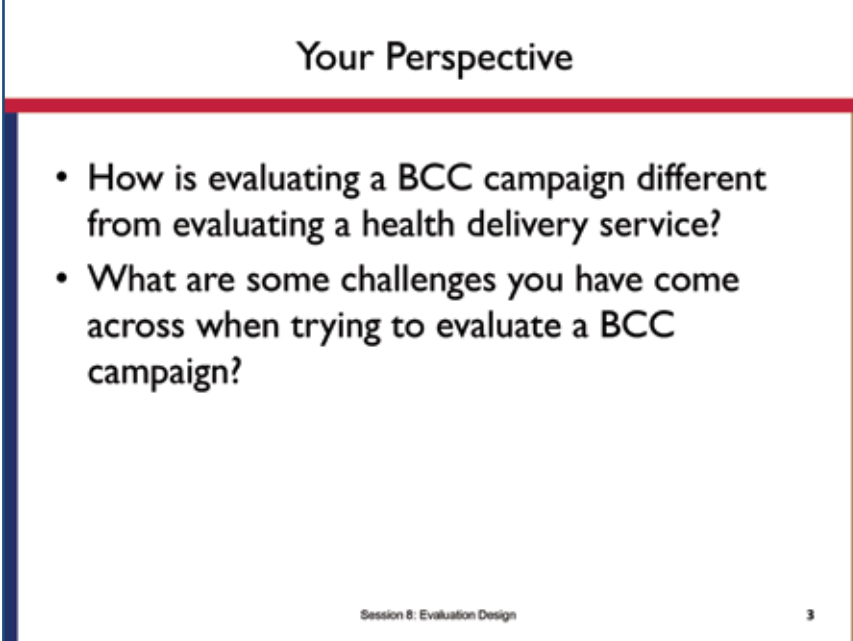
- Participants will be able to
 - Discuss the three main categories of evaluation design,
 - Identify two types of quasi-experimental designs, and
 - Select an appropriate evaluation design for a BCC campaign.

Session 8: Evaluation Design 2

Slide 8.2: Objectives

1 minute

- Read each of the objectives.
- Note that this session does not show how to actually design an evaluation. *However*, with the content in this session, participants should be able to recognise the strengths of each type of evaluation design and be able to select an appropriate design for their BCC campaign.
- Ask participants:
 - Does anyone have any questions before we begin with the session?

A presentation slide titled "Your Perspective" with a red horizontal bar and a blue vertical bar on the left. It contains two bullet points asking about evaluating BCC campaigns. At the bottom, it says "Session 8: Evaluation Design" and "3".

Your Perspective

- How is evaluating a BCC campaign different from evaluating a health delivery service?
- What are some challenges you have come across when trying to evaluate a BCC campaign?

Session 8: Evaluation Design 3

Slide 8.3: Your Perspective

3 minutes

- Ask participants:
 - How is the evaluation of BCC campaigns different from the evaluation of health delivery services?
 - What are some challenges you have come across when trying to evaluate the impact of a BCC campaign?

Evaluation of BCC Campaigns

- Evaluating BCC campaigns is different from evaluating other campaign interventions.
- BCC evaluations are not always as clear-cut as how many shots have been given or how many nets have been distributed.
- **What** should be measured and **how** that should be measured can all vary.

Session 8: Evaluation Design 4

Slide 8.4: Evaluation of BCC Campaigns

1 minute

- Explain that the evaluation of BCC campaigns is notably different from evaluations of other types of health programming.
- Note that sometimes this difference is because what you are monitoring and evaluating is not as clear-cut as it can be with other interventions. Unfortunately, monitoring and evaluating a BCC campaign is not always as easy as counting how many shots have been given although it can include that, too!

Challenges to Evaluating BCC

- Broadcast media is often at national level.
- Comparison groups can be difficult to find.
- Multiple campaigns and programmes work in the same environment, complicating attempts to attribute change to any one programme.
- Exposure to a campaign is difficult to measure.
- Short timeframes make intermediate outcomes more likely than changes in behaviour.

Session 8: Evaluation Design

5

Slide 8.5: Challenges to Evaluating BCC

5 minutes

- Explain that there are several reasons that evaluating BCC campaigns is more challenging than evaluating service delivery campaigns. For example:
 - Broadcast media is often used and implemented at the national level, making it difficult to have a comparison group that has not been exposed to the campaign. Even when a campaign is not implemented at a national level, finding an adequate comparison group (similar to the intervention group except for exposure to the programme) is difficult.
- Explain that multiple campaigns are frequently implemented at the same time and often work together to bring about change. In many cases, BCC is a complementary component of a programme that intervenes in many areas (e.g., service delivery, policy, infrastructure). It is, therefore, naturally difficult to attribute change to a specific programme or part of a programme.
- Explain that it also can be difficult to measure exposure to a campaign and, therefore, determine who was and who was not exposed.
 - M&E staff need to have a specific set of questions about the intervention to adequately measure exposure. Asking audience members if they heard a specific campaign is not enough; exposure can be examined through, for example, spontaneous recall of the programme, spontaneous knowledge of the campaign's messages, and spontaneous knowledge of the characters and specific events/characteristics of the programme.
- Explain that a campaign needs to be implemented consistently for a long time—at least 9–12 months—for changes to take place. Changes in intermediate outcomes (such as knowledge, attitudes, and intentions) may occur more quickly, but changes in behaviour may take longer (sometimes as long as 2 years of consistent campaign implementation).

Evaluation Designs

- Evaluation designs fall into three main categories:
 - Experimental
 - Quasi-experimental
 - Nonexperimental

Session 8: Evaluation Design 6

Slide 8.6: Evaluation Designs

2 minutes

- Explain that evaluations are either experimental, quasi-experimental, or nonexperimental.
- State that you will review each of the three categories and see what types of designs would fall into these categories. We'll look at experimental designs first.
- Ask participants:
 - What is an experimental design?

Experimental Designs

- **Randomised controlled trials**
 - Draw definitive conclusions about the effect of the campaign,
 - Require random assignment of individuals to treatment and control groups, and
 - Are almost never used in evaluating BCC campaigns.

Session 8: Evaluation Design 7

Slide 8.7: Experimental Designs

3 minutes

- Explain that experimental designs draw definitive conclusions about the effect of a campaign, and they require random assignment of individuals to treatment and control groups. It can be very difficult to create a random control group of individuals who will not be reached in some way by the campaign, particularly if your campaign uses mass media or if you want to implement the campaign nationwide—for that reason, control groups are almost never used in evaluating BCC campaigns.
- Ask participants:
 - What is a quasi-experimental design?

Quasi-Experimental Designs

- Do not require random assignment, and
- **Do** require a comparison group.

Session 8: Evaluation Design 8

Slide 8.8: Quasi-Experimental Designs

3 minutes

- Explain that, compared to experimental designs, quasi-experimental designs don't require random assignment but do require a comparison group.
- Emphasise that, as we've noted, quasi-experimental designs require a comparison group. There is almost always a "before" and "after" in these types of designs.
- Ask participants:
 - How does a comparison group work?
 - What questions does it answer?
 - How challenging is it?

Use of a Comparison Group

- Comparison to an unexposed outside group can more clearly show that changes are the result of the campaign.
- Data are collected from intervention and outside communities at various points, then compared.
- Comparison can help determine whether changes happened in the intervention group or in the outside group.
- Comparison groups (similar to intervention group except for exposure) can be challenging to find.

Session 8: Evaluation Design 9

Slide 8.9: Use of a Comparison Group

7 minutes

- Explain that one way to more clearly show that changes are a result of a campaign is to have a comparison to an outside group that has not been exposed to the intervention.
 - Data are collected from both the intervention communities and outside groups at different points in time and are analysed later to examine differences between the two groups over time. With this design, we can see if the programme contributed to changes within the intervention community but not in the comparison community.
- Mention that a slightly different design is to have a comparison group from within the same intervention community, specifically those who have not been exposed to the intervention (if you can find this group).
- Remind participants that it is difficult to have a comparison group in the evaluation of communication programmes because mass media is often used as well as implemented at the national level, thus making it difficult to find people who have not been exposed. Even when a campaign is not implemented at the national level, finding an adequate comparison group (that is similar to the intervention group except for exposure to the programme) is difficult.
- Ask participants:
 - What are some evaluation designs that might be considered quasi-experimental?

Common Quasi-Experimental Designs

- Pre- and post-test with comparison group, and
- Time series design with comparison group.

Session 8: Evaluation Design 10

Slide 8.10: Common Quasi-Experimental Designs

1 minute

- Explain that common quasi-experimental designs used in evaluating BCC campaigns are pre- and post-test designs and time series design. Both of these designs must use a comparison group to be considered quasi-experimental.
- Ask participants:
 - Has anyone here had experience with these evaluation designs?

Pre-and Post-Test Designs With Comparison Group

- Baseline with periodic follow-up data collection in the intervention and comparison groups, and
- Common to collect data at three points:
 - Baseline: Before the programme begins,
 - Midline: Halfway through the programme, and
 - Endline: At the end of the programme.

Session 8: Evaluation Design

11

Slide 8.11: Pre-and Post-Test Designs with Comparison Group

1 minute

- Explain that the pre- and post-test design is the most traditional approach. In most cases, you do a baseline and periodic follow-up data collection in both the baseline and comparison groups. It is common in programme evaluation to collect the same data at three points in time within the communities involved in the intervention.

Pre-and Post-Test Designs With Comparison Group (cont.)

- Allow implementers to determine the changes that have taken place in their community during campaign implementation, and
- Demonstrate that clear changes may signal a successful project.

Session 8: Evaluation Design 12

Slide 8.12: Pre-and Post-Test Designs with Comparison Group (continued)

3 minutes

- Explain that this design allows campaign managers to determine the changes that have taken place in their community during the time that they have been carrying out the campaign. If there are clear changes in the outcomes over time, then there is some evidence that the campaign may have been successful.
- Note that if you use a two-group pre- and post-test design with a comparison group, and you find changes in the intervention group but not the comparison group, that would certainly strengthen the case that changes are a result of your campaign.

Time Series Designs With Comparison Group

- Are similar to pre- and post-tests, with more data points;
- Involve tracking the desired result (output or outcome) at regular intervals in both the intervention and comparison groups; and
- Frequently use routinely collected data, such as the number of visits to a facility.

Session 8: Evaluation Design 13

Slide 8.13: Time Series Designs

3 minutes

- Explain that time series design is similar to pre- and post-tests; the difference is that there are more data points in a time series design.
- Explain that in time series you track results (output or outcome) at regular intervals over time.
- Note that the best way to do this is to use routinely collected data, such as the number of visits to a facility.

Time Series Designs With Comparison Group (cont.)

- **Goal is to test for significant changes immediately after the intervention(s).**
 - Evaluator compares results for a period just before and just after the intervention; and
 - Do results change significantly in the desired direction soon after the onset of the campaign?
- **Results frequently are presented in a histogram.**

Session 8: Evaluation Design 14

Slide 8.14: Time Series Designs (continued)

3 minutes

- Explain that the goal of time series design is to test for significant changes immediately after the campaign intervention or interventions. Do results change significantly in the desired direction soon after the intervention?
- Explain that the evaluator collects data and compares results for a period just before the intervention and just after it.
- Note that results are usually presented in the form of a histogram or line graph, and that analysis consists of looking at the slope of the curve on a line graph to see if the curve changes direction soon after the onset of the campaign.
- Ask participants:
 - What is a nonexperimental design?
 - What are some examples of these designs?

Common Nonexperimental Designs

- Many BCC campaigns use nonexperimental designs. These include
 - Pre- and post-test designs without comparison group (most traditional approach in evaluating BCC),
 - Time series designs without comparison group,
 - Qualitative methods, and
 - Post-only designs.

Session 8: Evaluation Design 15

Slide 8.15: Common Nonexperimental Designs

2 minutes

- Explain that many BCC campaigns use nonexperimental designs, including qualitative methods and post-only designs.
- Note that time series analysis can be either an experimental or nonexperimental design, depending on whether a comparison group is used. Let's look at that point a little more closely.

Quasi-Experimental or Non-Experimental?

- If you have a comparison group for a parallel analysis, the approach can be considered quasi-experimental. If you do **not** have a comparison group, it is **non**experimental.

Session 8: Evaluation Design 16

Slide 8.16: Time Series Designs

2 minutes

- Explain that, if you have a comparison group for which you are doing a parallel analysis, this approach can be considered quasi-experimental. If you do not have a comparison group for parallel analysis, the approach is still valid, but is considered nonexperimental.
- Point out that both pre-and post-test designs and time series designs can be either quasi-experimental or non-experimental. The deciding factor is whether or not evaluators are using a comparison group. If a comparison group is used, it is a quasi-experimental design. If a comparison group is not used, it is a nonexperimental design.

Qualitative Methods

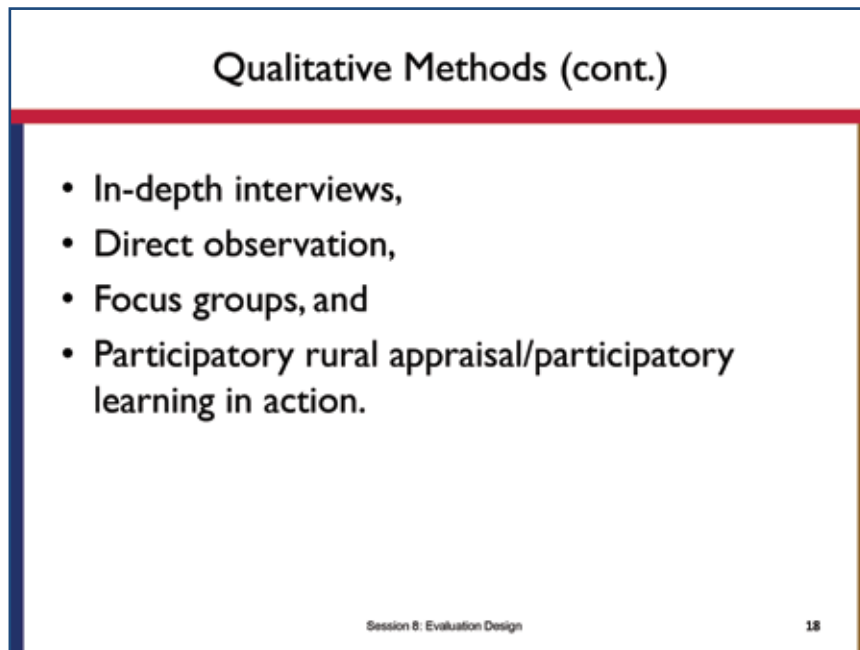
- Method can complement and strengthen the evaluation findings.
- Qualitative results can help explain the quantitative findings.
 - **Quantitative** findings are the “what?” or “how many?”
 - **Qualitative** findings are the “why?” or “how?”

Session 8: Evaluation Design 17

Slide 8.17: Qualitative Methods

2 minutes

- Explain that, though the evaluation of BCC programmes generally relies on measuring change through quantitative methods, in particular through surveys of the target audience, qualitative methods should be used to complement, explain, and strengthen the evaluation findings. They provide the “why” and the “how” for your findings.
- Ask participants:
 - What are some common qualitative methods that could be used in the evaluation of BCC campaigns?
- Write the participant responses on a flipchart.



The slide is titled "Qualitative Methods (cont.)" and features a red horizontal bar at the top. Below the bar, a list of four qualitative methods is presented. At the bottom of the slide, the text "Session 8: Evaluation Design" and the number "18" are visible.

Qualitative Methods (cont.)

- In-depth interviews,
- Direct observation,
- Focus groups, and
- Participatory rural appraisal/participatory learning in action.

Session 8: Evaluation Design 18

Slide 8.18: Qualitative Methods (continued)

2 minutes

- Review and compare the list on this slide to the list of participant responses.
 - Note to facilitator: Participatory Rural Appraisal/Participatory Learning in Action (PRA and PLA) include a large group of exercises, activities, and approaches that enable local (either rural or urban) people to express, enhance, share, and analyse their knowledge of life and conditions. Some of these methods include participatory mapping and modelling, transect walks, matrix scoring, well-being grouping and ranking, seasonal calendars, institutional diagramming, trend and change analysis, and analytical diagramming. For more information on PRA, participants can refer to any publication by Robert Chambers.

Post-Only Designs

- Post-only designs are those that do not include pre-tests or baseline data collection.
- Data collection takes place after the campaign has been implemented.
- Although these designs are considered nonexperimental, they can be very strong when combined with advanced statistical analysis.

Session 8: Evaluation Design 19

Slide 8.19: Post-Only Designs

1 minute

- Explain that post-only designs are those that do not include pre-tests or baseline data collection, and that data collection happens only after the campaign has been implemented.
- Stress that, although these designs are considered nonexperimental, they can be very strong when combined with advanced statistical analysis.

Scenario Exercise: Evaluation Design

- What evaluation designs would you use for the HIV/AIDS campaign?
 - What are some of the reasons you chose that design?

Session 8: Evaluation Design 20

Slide 8.20: Scenario Exercise: Evaluation Design

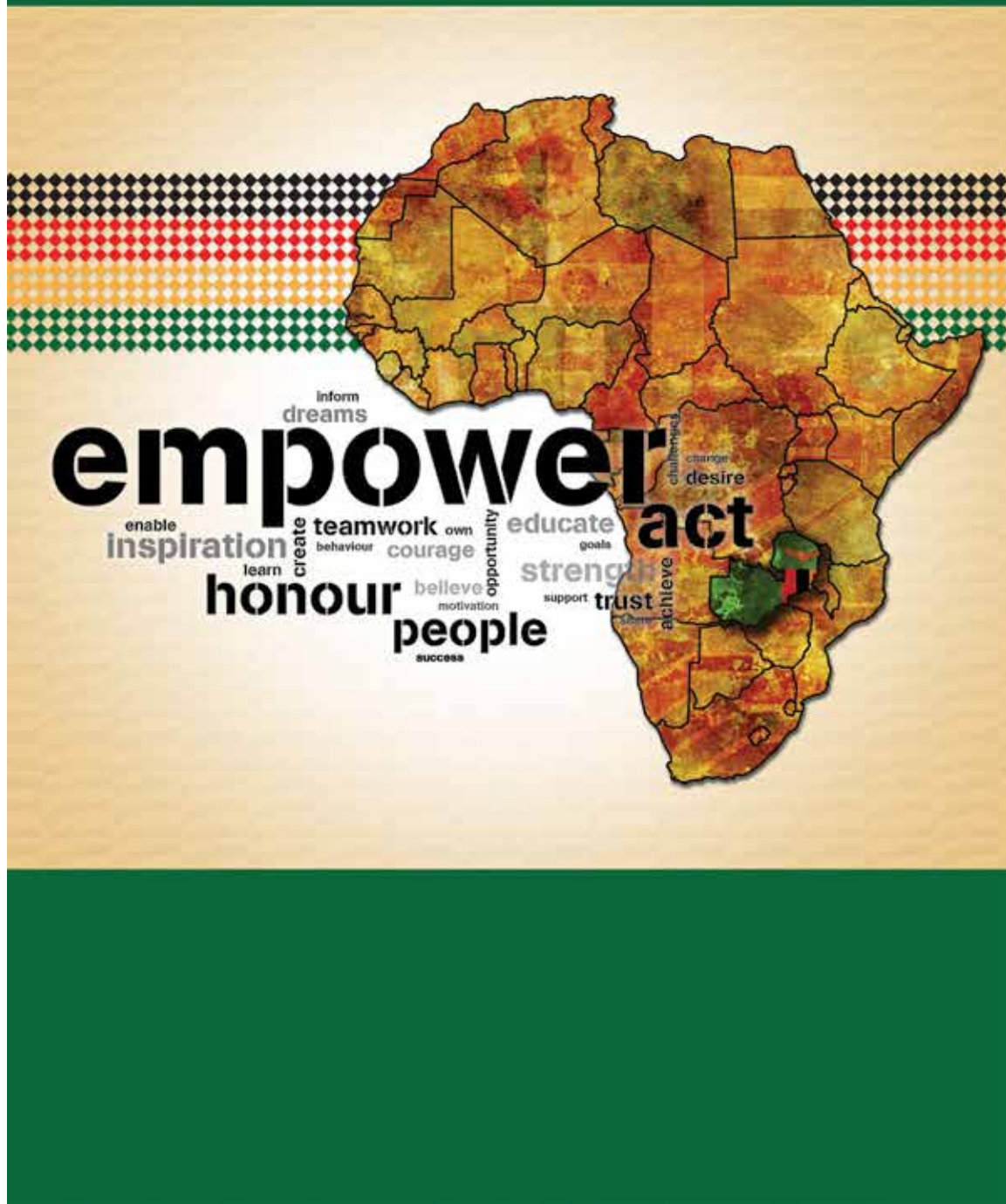
35 minutes

- Ask participants to work within their groups to outline the evaluation designs they would use for their component (MCP or MTCT) of the HIV/AIDS campaign.
- Hand out a piece of flipchart paper to each group to write down their evaluation outlines.
- Distribute index cards that have several complicating criteria on them that the groups will have to take into consideration when selecting an appropriate evaluation design. Have someone from each of the groups choose one of the cards at random. Cards can include complicating factors such as:
 - Your budget is limited to do this evaluation, so you must pick the least expensive option possible.
 - Although this was a nationwide campaign, you only have enough funding to conduct the evaluation in one province of the country.
 - You have implemented a new and innovative campaign that has already shown some great results in increasing PMTCT use at the health facilities. Your funder is interested in learning more about how the campaign worked to influence women and couples to use MTCT.
 - The campaign you are evaluating had to get started quickly and did not have sufficient time to collect any baseline data before the campaign began.
 - Your funder is very interested in understanding the effect of the campaign on the behaviours of interest, as they are interested in scaling up the approach nationwide and potentially to other countries. Thus, the funder is interested in determining whether any changes observed can be attributed to your campaign in order to decide if it is worth scaling-up the campaign.

- Point out that there is a chart in participant's booklets to record their evaluation outlines and review after the training. (Scenario Exercise: Evaluation Design and Analysis, in the *Participant's Guide* on page 170)
- Allow teams 20 minutes to work on their outlines and 15 minutes for each of the teams to report on their outlines.

Tea Break

SUPPLEMENTAL SESSION



Supplemental Session: Approaches to Statistical Data Analysis

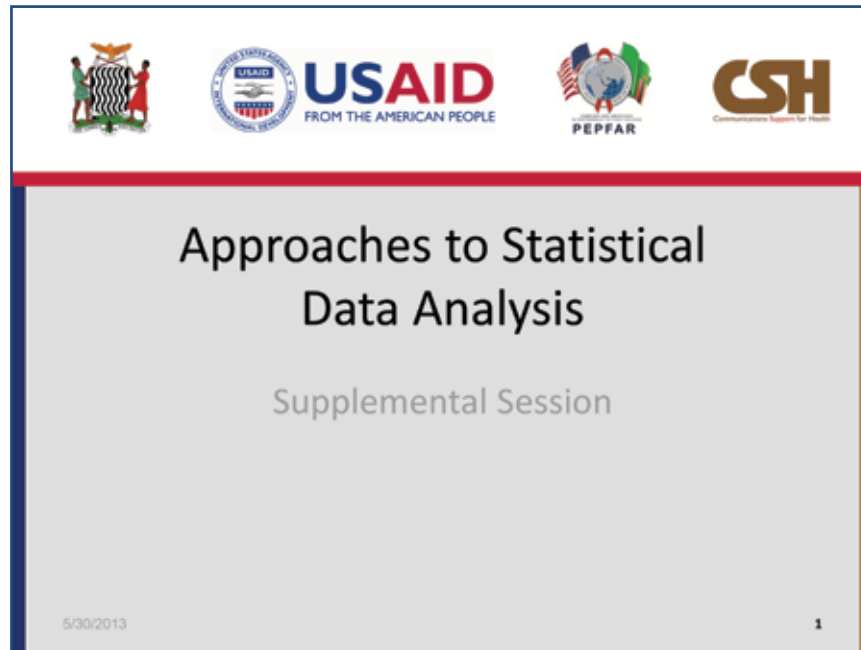


20 minutes

Session Objectives	<ul style="list-style-type: none"> Name three approaches to analysis that can be used in BCC campaign evaluations
Methods	<ul style="list-style-type: none"> Lecture Group discussion
Materials	<ul style="list-style-type: none"> (none needed)

KEY DISCUSSION POINTS

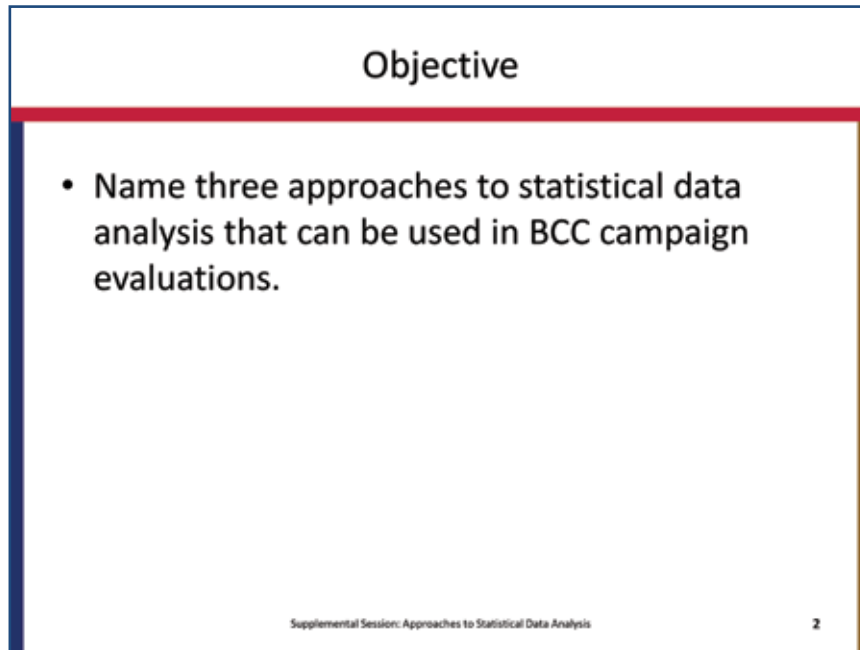
- Explain to the participants that the aim of this session is to introduce participants to the types of common statistical analyses that are used when conducting evaluations of BCC campaigns. Due to time limitations it is not possible to cover how to carry out these analyses.



Slide SS.1: Approaches to Statistical Data Analysis

1 minute

- Explain that this supplemental session will discuss common statistical data analysis approaches used in BCC campaign evaluations.



The slide is titled "Objective" in a large, bold, black font at the top center. Below the title is a thick red horizontal line. Underneath the line is a single bullet point: "• Name three approaches to statistical data analysis that can be used in BCC campaign evaluations." At the bottom of the slide, there is small text that reads "Supplemental Session: Approaches to Statistical Data Analysis" on the left and the number "2" on the right.

Slide SS.2: Objective

1 minute

- Read the objective from the slide.
- Ask participants:
 - Does anyone have any questions before we begin the session?

Analytical Approaches

- Statistical data analysis is used to evaluate the effect of a campaign.
- Common approaches include
 - Multivariate logistic regression models
 - Propensity score analysis
 - Dose response analysis
- Usually conducted with data from a post-campaign survey for BCC campaigns.

Supplemental Session: Approaches to Statistical Data Analysis 3

Slide SS.3: Analytical Approaches

3 minutes

- Explain that statistical data analysis is used to evaluate the effect of a campaign.
- Note that evaluations of BCC campaigns frequently use one of three analytical approaches: multivariate logistic regression models, propensity score analysis, and dose response analysis.
- Explain that these types of analyses can be used in combination with many evaluation designs, but that in BCC campaigns these types of analyses are usually conducted with data from a post-campaign survey.
- Note that regression and dose response analysis are also done using the post-campaign survey because you the exposure variables need to be included in the analysis, and those are not available from a baseline, necessarily conducted before the campaign was implemented. All three methods can be used with a pre- and post-design, but the analysis is actually done using the latter survey.
- Ask participants:
 - What is a multivariate regression model?
 - How many of you have used multivariate regression models? What has been your experience with them?

Multivariate Logistic Regression Models

- Models look at the relationship between exposure to the campaign (often measured as exposed or not exposed) and the outcomes of interest.
- “Multivariate” means this type of analysis looks at more than one variable at a time.
- Other variables can be controlled or adjusted.
- Models ensure that any effect you see is the result of your programme, not a result of something such as socioeconomic status.

Supplemental Session: Approaches to Statistical Data Analysis

4

Slide SS.4: Multivariate Logistic Regression Models

3 minutes

- Explain that a multivariate logistic regression model looks at the relationship between exposure to the campaign and an outcome of interest, such as discussing circumcision with a partner or health care provider.
- Point out that the word “multivariate” means that this type of analysis looks at more than one variable at a time. Because of this, you can control or adjust for other variables that may also have an effect or influence on your outcomes of interest. You want to be sure that any effect you see is the result of your programme, not a result of something like socioeconomic status. Multivariate logistic regression allows you to make sure that the results are isolated to one variable and not another.
- Ask participants:
 - How many of you have used multivariate regression models? What has been your experience with them?

Multivariate Logistic Regression Models (cont.)

- **Logistic regression produces odds ratios.**
 - Shows how much the exposure to a campaign increased the odds (made it more likely) that a person would perform the desired outcome.
 - Does not give you a measure of effect or the percentage point difference in the outcome of interest between those exposed or unexposed.

Supplemental Session: Approaches to Statistical Data Analysis 5

Slide SS.5: Multivariate Logistic Regression Models (continued)

3 minutes

- Explain that this approach produces odds ratios. Results can tell you how much exposure to the campaign increased the odds (made it more likely) that a person would perform the desired behaviour.
- Highlight that this approach does not give you a measure of effect or the percentage point difference in the outcome of interest between those exposed or unexposed.
- Ask participants:
 - What is a propensity score analysis?

Propensity Score Analysis (PSA)

- Is increasingly being used to evaluate the effect of BCC campaigns since it only requires a post-campaign survey.
- Approximates a randomly controlled trial by creating a statistically equivalent “control group”:
 - Matches the unexposed and exposed groups so that they are equivalent (on average) in terms of observed characteristics (e.g., sociodemographic, access to media) included in the analysis.

Supplemental Session: Approaches to Statistical Data Analysis 6

Slide SS.6: Propensity Score Analysis

2 minutes

- Explain that the propensity score analysis (PSA) is a statistical analysis procedure that allows mass media campaigns to be evaluated using a one group post-test-only design. The one group post-test only design approximates a randomly controlled trial by creating a statistically equivalent “control group.”
- Explain that this procedure enables one to test for a significant difference in a desired outcome between those exposed to the campaign and those not exposed but who have similar sociodemographic characteristics and access to media.
- Point out that this matching procedure means the two groups are comparable. If they are not matched, then any significant difference in the outcomes between the two groups may be a result of underlying differences, such as age or frequency of TV watching, rather than a result of the campaign.

Propensity Score Analysis (cont.)

- Matching allows evaluators to compare the two groups and attribute any significant differences to the campaign.
- PSA produces the percentage point difference in the outcome of interest between those exposed and unexposed.
- The percentage point difference is interpreted as the change that occurred in the outcome as a result of exposure to the campaign.

Supplemental Session: Approaches to Statistical Data Analysis

7

Slide SS.7: Propensity Score Analysis (continued)

2 minutes

- Explain that PSA statistically matches the unexposed group to the exposed group so that they are equivalent, on average, in terms of all of the observed characteristics used to construct the scores.
- Explain that any differences between the two groups (exposed and unexposed) can then be attributed to your campaign.
- Point out that PSA can also be used with dose effect analysis, which we'll be discussing next.
- Ask participants:
 - What is a dose effect or dose response analysis?

Dose Response Analysis

- Also known as dose effect analysis.
- Tests the hypothesis that higher levels of exposure to a campaign are more likely to result in the desired outcome compared to lower levels of exposure.
- If a relationship between the “dose” of exposure and the desired outcome is found, then there is stronger evidence that a campaign affected an outcome.

Supplemental Session: Approaches to Statistical Data Analysis

8

Slide SS.8: Dose Response Analysis

2 minutes

- Explain that dose response analysis (also known as dose effect) uses only a post-survey and tests the hypothesis that the higher the level of exposure to a given campaign, the more likely is the desired outcome, controlling for sociodemographic factors and access to media.
- Point out that the detection of a dose-response relationship between the “dose” of exposure and the desired outcome helps strengthen the claim that the campaign affected the outcome.

Dose Response Analysis (cont.)

- Evaluators must measure exposure to the campaign through multiple channels.
- Evaluators cannot only measure whether a person knows of the campaign. They must look at the exposure and recall of multiple aspects of the campaign, such as
 - Name of campaign/campaign slogan/logo;
 - Small media/mass media components of the campaign; and
 - Campaign messages.
- Dose response can be used with logistic regression or PSA to control for other variables.

Supplemental Session: Approaches to Statistical Data Analysis

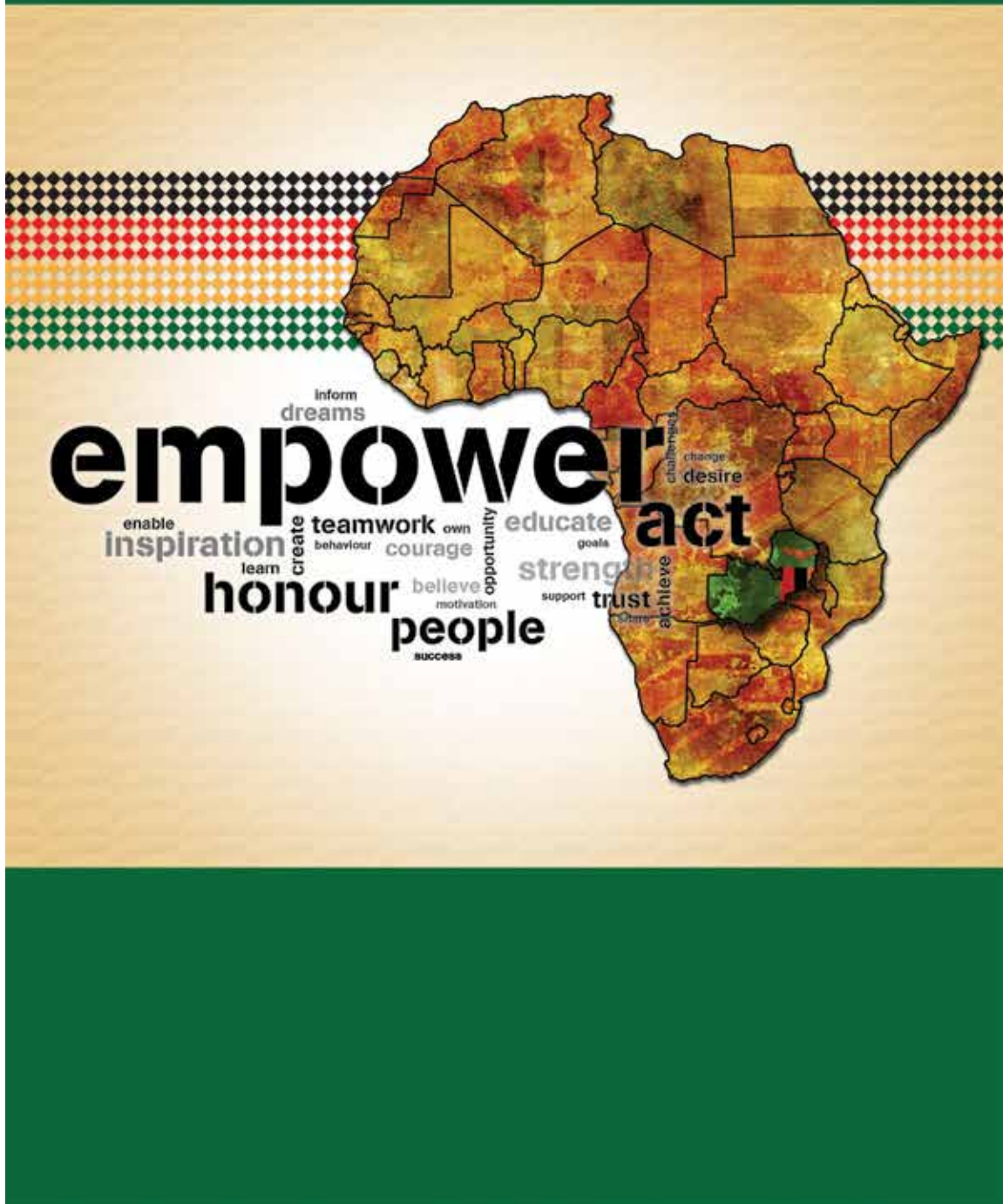
9

Slide SS.9: Dose Response Analysis (continued)

2 minutes

- Explain that evaluators must measure exposure to the campaign through multiple measures. In other words, you cannot just measure whether the person knew of the campaign. Rather, you must look at exposure to various elements of the campaign (e.g., recall of campaign name/campaign slogan/logo, recall of small media/mass media components of the campaign, recall of campaign messages).

SESSION 9



Session 9: Data Presentation



90 minutes

<p>Session Objectives</p>	<ul style="list-style-type: none"> • Understand different ways of summarising data • Choose the right table or graph, depending on the intended audience • Ensure that graphics are easy to read and understand
<p>Methods</p>	<ul style="list-style-type: none"> • Lecture • Group discussion • Scenario exercise
<p>Materials</p>	<ul style="list-style-type: none"> • Flipchart • Markers

KEY DISCUSSION POINTS

- Highlight the importance of presenting data in a user-friendly way, as the main goal of presenting data is to be able to get others to understand and use the data for programme improvement and management.
- Stress that graphs should be tailored to the audience. They should also be able to speak for themselves, meaning that someone should be able to understand the data that are being presented in the graph without any explanation.
- Emphasise that less is more when presenting results. Try to present key findings that are actionable, and do not overwhelm the audience with too much data.



Slide 9.1: Data Presentation

1 minute

- Explain that this session will address best practices in presenting M&E data in a way that is easy for others to understand.

Objectives

Participants will be able to

- Understand different ways of summarising data,
- Choose the right table or graph depending on the intended audience, and
- Ensure that graphics are easy to read and understand.

Session 9: Data Presentation **2**

Slide 9.2: Objectives

1 minute

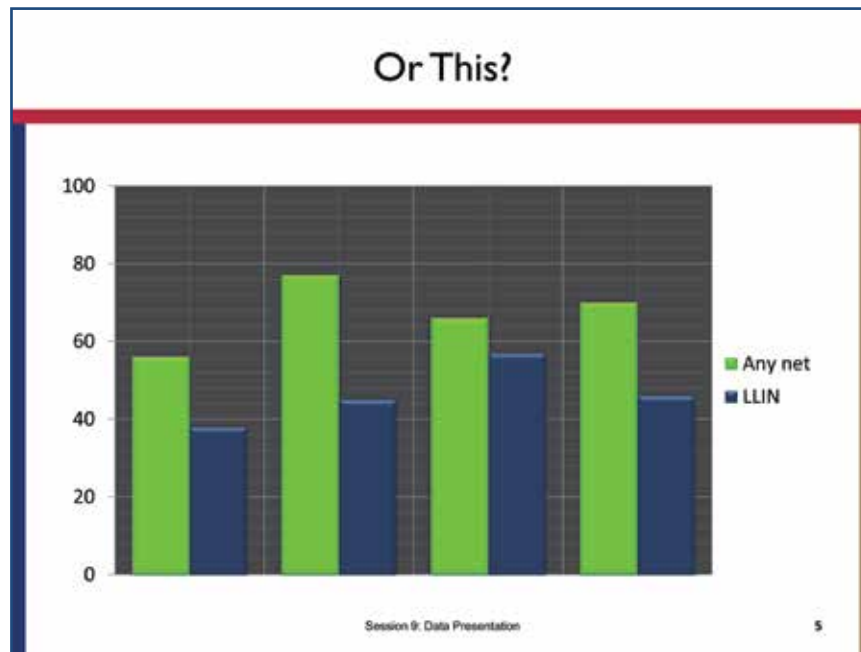
- Read each of the objectives.
- Ask participants:
 - Does anyone have any questions before we begin with the session?



Slide 9.3: Do You Present Yourself Like This?

2 minute

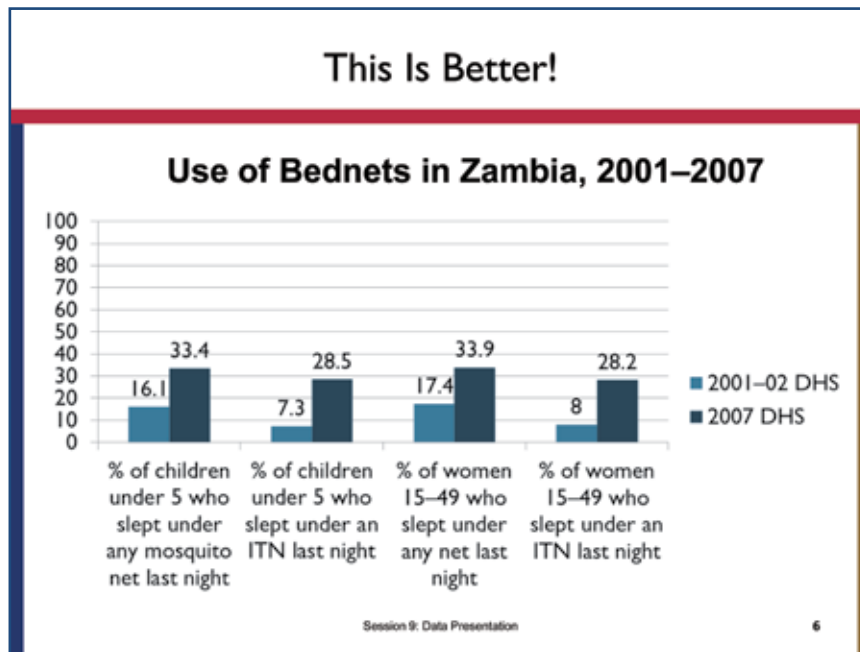
- Ask participants:
 - Would you present yourself like this?
 - What do you think would happen if this man tried to speak to someone in the Ministry of Health about some information related to a BCC campaign? Would he even be let in?
- Explain that presenting yourself like this will likely mean that others won't take you seriously if you are in a meeting with your colleagues or client.



Slide 9.5: Or This?

2 minutes

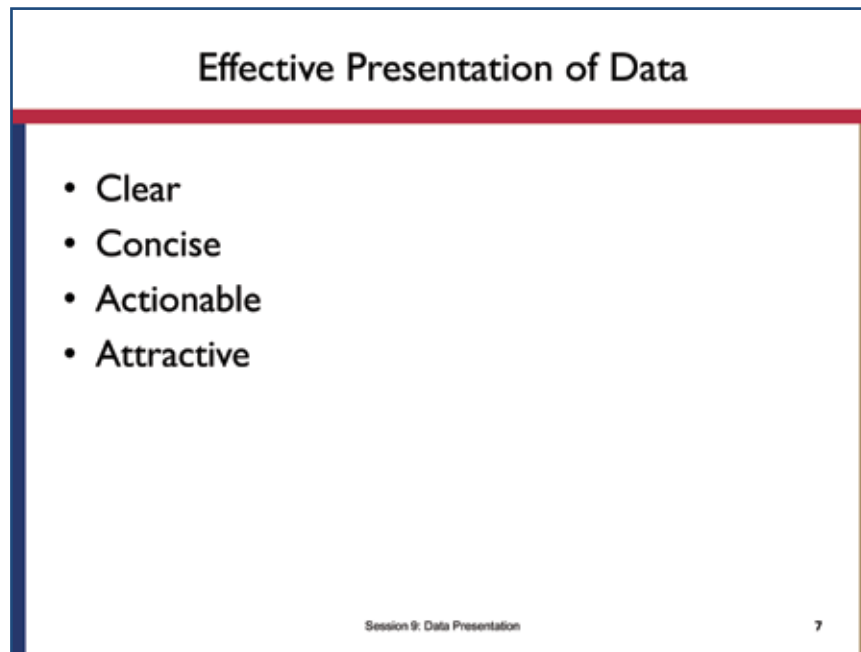
- Ask participants:
 - Would you present data like this?
 - What are some of the problems with this chart?
- Note to facilitator: Possible answers might include no title, no axis labels, the dark colour on a dark background is difficult to read, and the green is too bright and glaring.



Slide 9.6: This Is Better!

2 minutes

- Explain that you are going to go back and forth between the two graphs (slides 5 and 6).
- Ask participants:
 - Other than the data points themselves, what are some differences you see between these two graphs? What are the differences in how they present the data?



Slide 9.7: Effective Presentation of Data

3 minutes

- Explain that, regardless of the communication formats you use, the information should be presented in a clear, concise way with key findings and recommendations that are actionable. People will be able to best read those findings and recommendations if the data are presented in an attractive way.
- Ask participants:
 - What else makes a presentation of data effective in a report or a PowerPoint presentation?
- Write the participant responses on a flipchart.

Tips for Presenting Data in PowerPoint

- Ensure that all text is readable from a distance;
- Use sans serif fonts
 - Gill Sans (sans serif)
 - Times New Roman (serif)
- Try to use graphs or charts, not tables;
- Keep slides simple;
- Limit animations and special effects; and
- Use high-contrast text and backgrounds.

Session 9: Data Presentation

8

Slide 9.8: Tips for Presenting Data in PowerPoint

1 minute

- Review the responses on the flipchart and compare to the points on the slide.
- Explain that all text on a slide should be readable from the back of the room. Try to avoid having text that is smaller than 25 point font. There are exceptions, of course (especially when creating and using graphs and charts), but try to make sure that everything is readable from the back of the room.
- Point out that it's best to use no more than two typefaces per presentation. In PowerPoint slides, a sans serif typeface can be more readable than a serif typeface.
- Suggest that participants should try to use graphs or charts, not tables. Although tables can be a succinct way of presenting data, tables are frequently difficult to read in a PowerPoint presentation.
- Explain that nothing in their slides should be superfluous (no extra doodads for decoration).
- Tell participants to limit the use of animations and other special effects. Use them sparingly, if at all.
- Mention that, ideally, there should be no more than six lines per slide, with six words per line.
- Explain that they should resist the urge to add too many slides—present the key data/information and don't overload your audience with data that are not useful.
- Note that a light background with dark text (such as this one) will show up better in a light-filled room than a slide with a dark background and light text.

Effective Presentation of Data (cont.)

- For all communication formats, it is important to ensure that there is
 - Consistency
 - Font, colors, punctuation, terminology, and line/ paragraph spacing.
 - An appropriate amount of information
 - Less is more.
 - Appropriate content and format for audience
 - Scientific community, journalist, and politicians.

Session 9: Data Presentation 9

Slide 9.9: Effective Presentation of Data (continued)

4 minutes

- Review the points on the slide and compare to the participant responses from the previous question, slide 7.
- Mention that one way to ensure that you create consistent materials is to decide on a template for the document, presentation, graph, or other product before you produce it. You can then give these guidelines to the different people involved in the process, and you will only have to do minor formatting at the end. This helps to ensure that there is consistency in the font, colours, paragraph spacing, etc.
- Suggest that, on a PowerPoint slide, participants should try to limit text. The slide should be a **summary**, and should not contain the text for an entire report. Avoid putting complete paragraphs on a slide!
- Explain that your audience and format determine how much information to provide. Policy makers may do better with direct and concise summaries of key points, whereas the scientific community will want more detail.
- Ask participants:
 - What are a couple of options to summarise and present data?

Summarising Data

- **Tables**
 - These are the simplest way to summarise data.
 - Data are presented as absolute numbers or percentages.
- **Charts and graphs**
 - They serve as a visual representation of data.
 - Usually, data are presented using percentages.

Session 9: Data Presentation 10

Slide 9.10: Summarising Data

3 minutes

- Explain that the two main ways of summarising data are by using tables and charts or graphs.
- Explain that a table is the simplest way of summarising a set of observations. A table has rows and columns containing data that can be in the form of absolute numbers or percentages, or both.
- Note that tables can be good for side-by-side comparisons, but can lack visual impact when used on a slide in a presentation.
- Explain that graphs are pictorial representations of numerical data and should be designed so that they convey, at a single look, the general patterns of the data. Generally, the data in a table are in the form of percentages.
- Note that the most informative graphs are simple and self-explanatory.

Points To Remember

- Ensure that graphic has a title,
- Label the components of your graphic,
- Indicate source of data with date,
- Provide number of observations (n=xx) as a reference point, and
- Add footnote if more information is needed.

Session 9: Data Presentation 11

Slide 9.11: Points To Remember

3 minutes

- Explain that you can make a graph as self-explanatory as possible by keeping in mind the following tips:
 - Every table or graph should have a title or heading.
 - The x and y axes of a graph should be labelled, should include value labels such as a percentage sign, and should include a legend.
 - The source of your data should be cited, and participants should put the date when the data were collected or published.
 - The sample size or the number of people to which the graph is referring should be given.
 - A footnote should be included if the graphic isn't self-explanatory.
- Explain that these tips will help pre-empt questions and explain the data. The next several slides will show examples of these tips in action.
- Ask participants:
 - In thinking about titles for tables and graphs, what should be included in the title?
- Write the participant responses on a flipchart.

Choosing a Title for Tables and Graphs

- A title should express
 - Who
 - What
 - When
 - Where

Session 9: Data Presentation 12

Slide 9.12: Choosing a Title for Tables and Graphs

1 minute

- Review the responses on the flipchart and compare to the points on the slide.
- Explain that a title should most of the time express who, what, when, and where.
- Ask participants:
 - For example, let’s say you have a graph with the title, “Mosquito Net Use.” What does that tell you? What does that NOT tell you?

Tables: Frequency Distribution

Zambia Infant Mortality Rates, 1992–2007

Year	Mortality Rate
2007	82
2001–2	94
1996	108
1992	98

Source: ICF International, 2012 MEASURE DHS STATcompiler, <http://www.statcompiler.com>, November 28, 2012.

Session 9: Data Presentation 13

Slide 9.13: Tables: Frequency Distribution

2 minutes

- Explain that a frequency distribution is a set of classes or categories, along with numerical counts that correspond to each one, such as number of cases in a given year.
- Note that this table includes both a title and a reference. The citation is one area where it is acceptable to have typeface that is fairly small in relation to the rest of the text. You do want to have the citation on the slide so that people can know where the data are from if they want that information, but the citation is not the most important part of the slide. You want to draw attention to the data, not the citation itself.

Use the Right Type of Graph

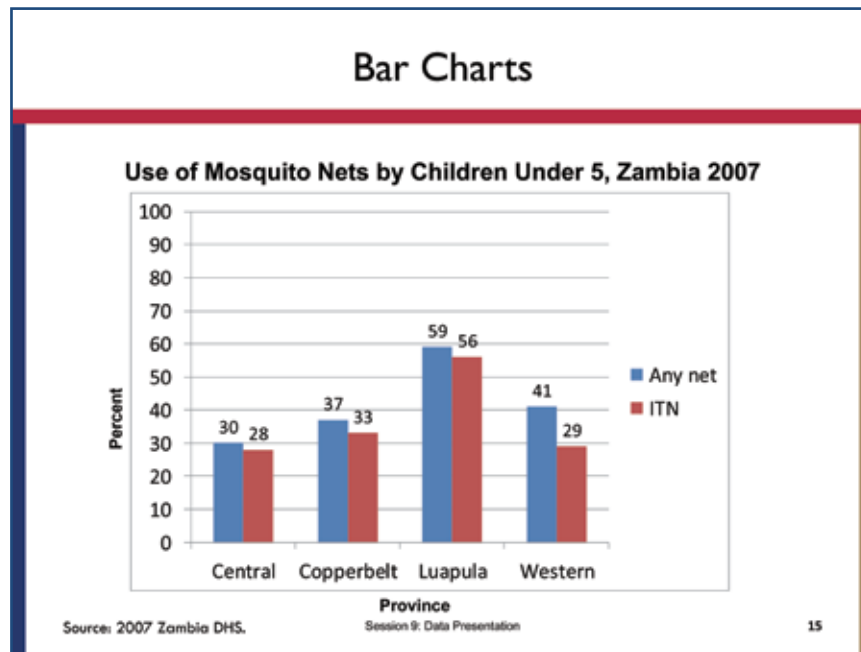
- Charts and graphs
 - **Bar chart:** comparisons, categories of data;
 - **Histogram:** represents relative frequency of continuous data;
 - **Line graph:** displays trends over time, continuous data (e.g., cases per month); and
 - **Pie chart:** shows percentages or proportional share.

Session 9: Data Presentation 14

Slide 9.14: Use the Right Type of Graph

5 minutes

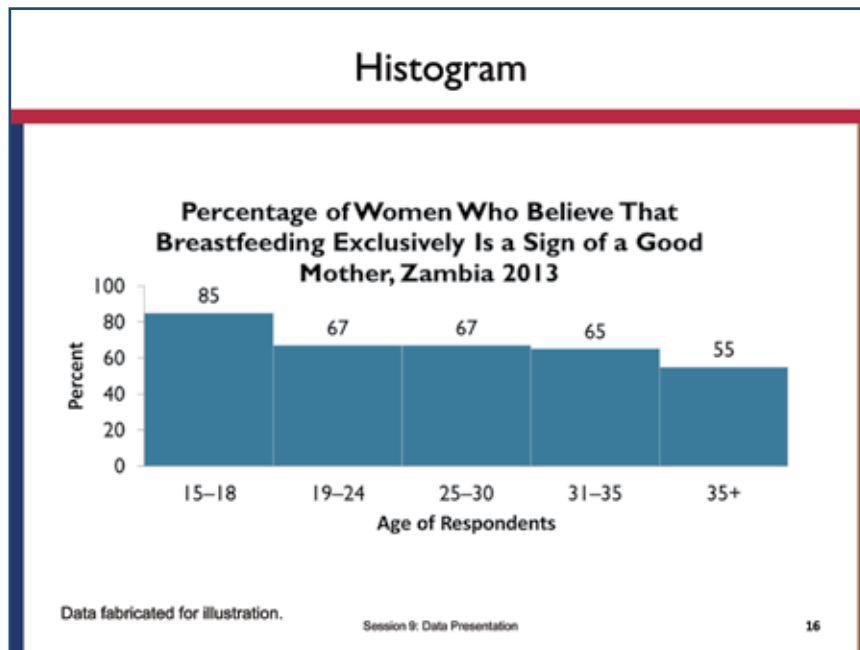
- Explain that you are going to review the most commonly used charts and graphs in Excel/PowerPoint.
- Note that bar charts are used to compare data across categories.
- Explain that a histogram looks similar to a bar chart but is a statistical graph that represents the frequencies of a variable that form a continuous range from left to right. We'll get into this in more detail in a few slides.
- Explain that line graphs display trends over time, continuous data (e.g., cases per month).
- Explain that pie charts show percentages or the contribution of each value to a total. When there are more than four categories, it is best to use a bar chart so that it is readable.



Slide 9.15: Bar Charts

3 minutes

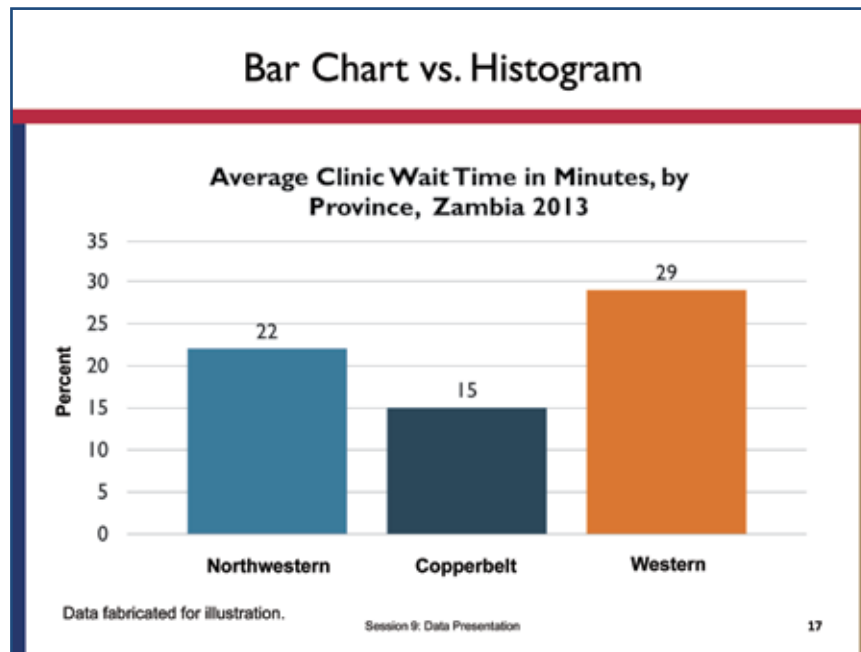
- Explain that in this bar chart we’re comparing the categories of data, which are any net or ITN.
- Note that it is best if you set a limit of four to eight bars to keep it readable, especially if it is to be used in a PowerPoint presentation.
- Explain that the graph includes a title and data labels. This chart also includes a source of the data, but it isn’t necessary to include the source on every slide if all of your tables and graphs are derived from the same source or data set and you have stated that at the beginning.



Slide 9.16: Histogram

1 minute

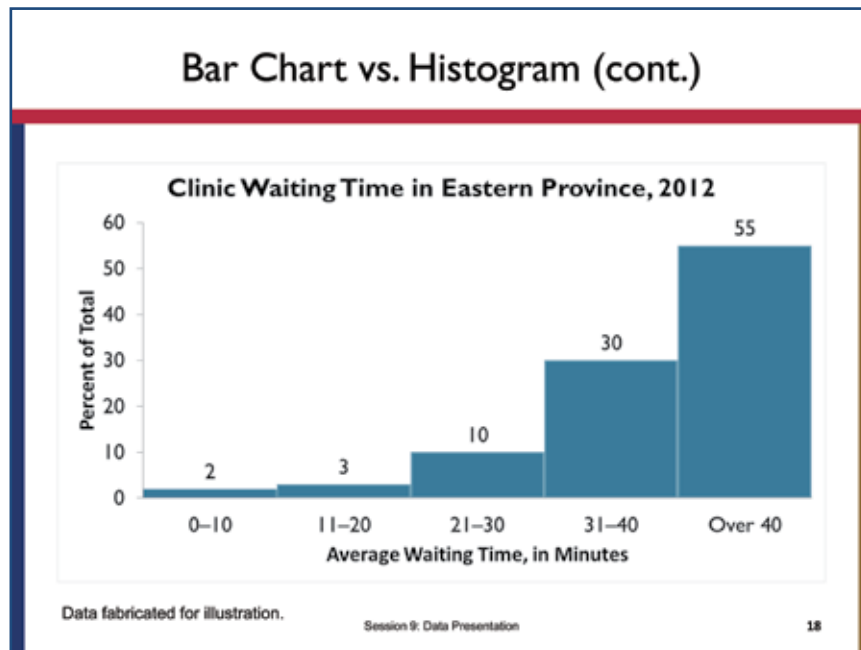
- Explain that this is a histogram. At first glance, histograms look a lot like bar charts. Both are made up of columns and are plotted on a graph.
- Note that there are some key differences. The major difference is in the type of data presented on the x (horizontal) axis. With bar charts, each column represents a group defined by a categorical variable. This variable could be types of different football teams, health facilities, or provinces. These are all categories.
- Explain that a histogram presents **quantitative** variables; the groups on the chart are always made up of numbers or something that could be turned into numbers. This could be age, height, weight, the number of minutes women wait in a queue, years, or months of the year. These groupings are sometimes called “bins.” The bin label can be a single value or a range of values. For example, you could split out the time spent waiting in line by the minute (5 minutes, 6 minutes, 7 minutes), or you could split it into chunks (fewer than 5 minutes, 6–10 minutes, 11–15 minutes).



Slide 9.17: Bar Chart vs. Histogram

1 minute

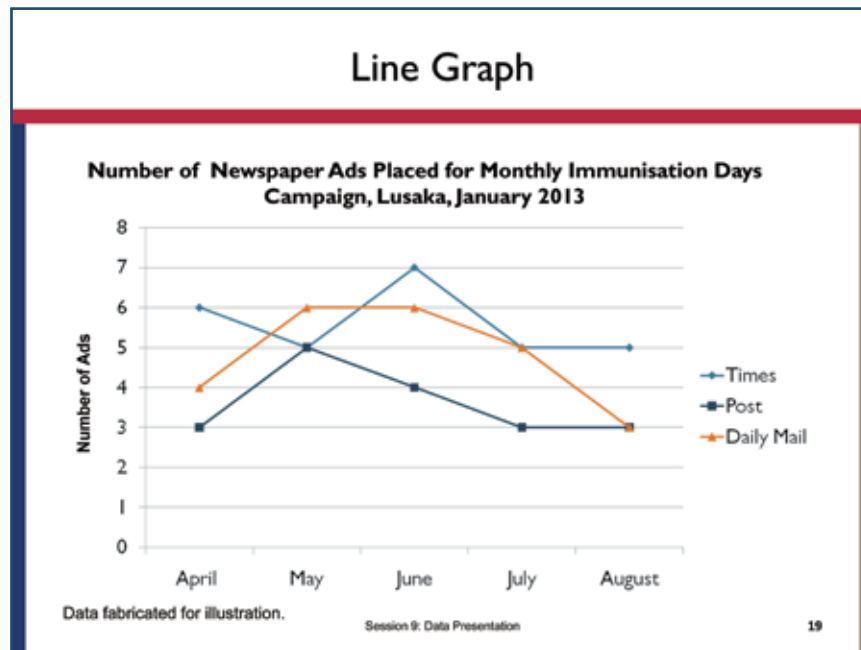
- Note that you are going to look at a bar chart to compare and contrast how they are used.
- Explain that the columns in a typical bar chart can be arranged however you want to arrange them: alphabetically, by height, or the order in which you received the data—it doesn't really matter. No matter which column comes first in this presentation, the idea presented does not change.



Slide 9.18: Bar Chart vs. Histogram (continued)

1 minute

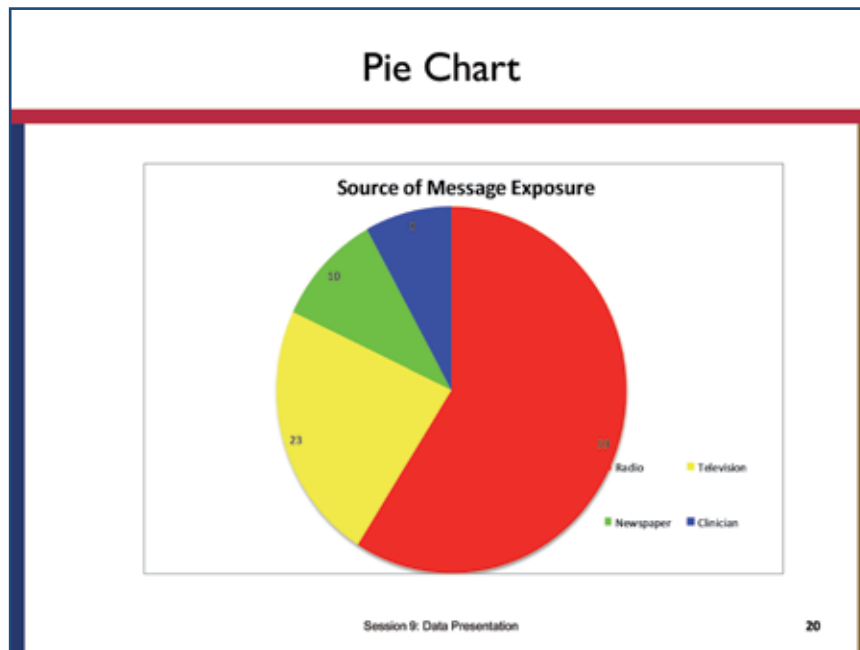
- Note that in contrast to a bar chart in which you can rearrange the bars at will, the order of the columns in a histogram is very specific, and the columns cannot be rearranged.
- Explain that the columns are arranged from low to high in a histogram. A bar chart does not have a “high” end and a “low” end. A histogram does. You can see on this chart that the data are “skewed” toward the high end. It would NOT make sense to rearrange the columns on this chart.
- Ask participants:
 - Does anyone have any questions about histograms and bar charts?



Slide 9.19: Line Graph

1 minute

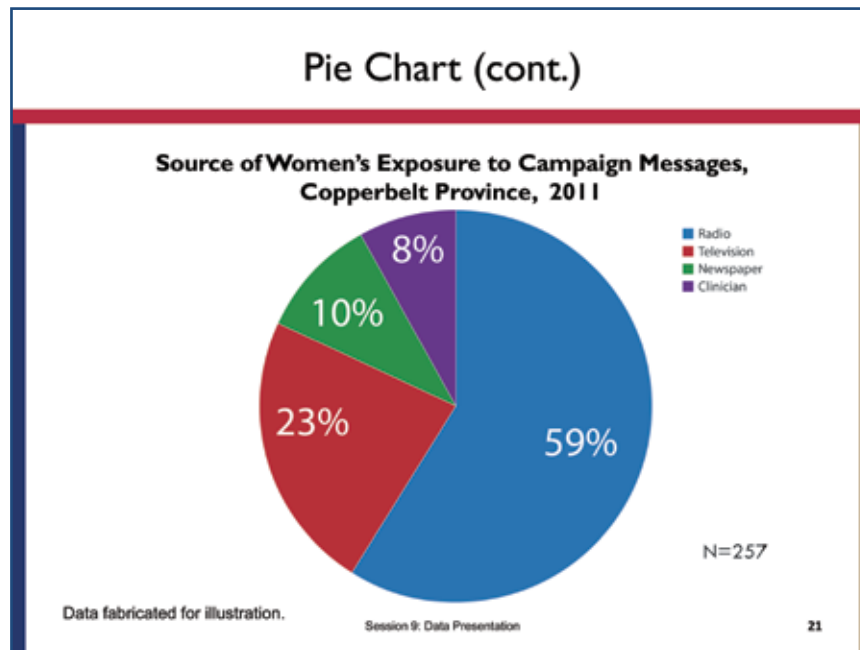
- Explain that a line graph should be used to display trends over time and is particularly useful when there are many data points. In this case, we have five data points for each newspaper running advertisements about an immunisation campaign.
- Note that a line graph makes it easy to compare data over time.



Slide 9.20: Pie Chart

2 minutes

- Explain that a pie chart displays the contribution of each value to a total. In this chart, the values always add up to 100.
- Ask participants:
 - What should be added to this chart to provide the reader with more information?
 - What should be changed about this chart to make it more readable?



Slide 9.21: Pie Chart (continued)

3 minutes

- Explain that a pie chart displays the contribution of each value to a total. In this case, we used the chart to show sources of exposure. According to this pie chart, the largest source of exposure is the radio.
- Explain that, to improve the understanding of the pie chart, we've added a more descriptive title and added value labels. On the previous chart, we couldn't tell if the values were numbers or percentages. Adding the sample size lets us know the total number of observations.
- Explain that it is also important to have charts that are attractive, easy to look at, and easy to read. The chart on the previous slide was so colourful that it was distracting; the colours were so bright that it was hard to look at the chart, let alone read it. While these colours are not the most interesting, they let the reader focus on the chart. The last chart was an exaggeration, but make sure that you do not make the same mistake on a smaller level.
- Note that it's best to limit the pie chart to four to six slices. For extra pizzazz, contrast the most important slice either with color or by "exploding" the slice, meaning to make it look like one slice is being taken out of the chart.

Exercise: How Should You Present?

1. Prevalence of HIV in three countries over a 30-year period,
2. Data comparing breastfeeding in six different countries,
3. Data on reasons why women are not using ANC (out of all women surveyed who are pregnant and not using ANC), and
4. Percentage of women who intend to deliver in a health facility, by year (2007–2012).

Session 9: Data Presentation 22

Slide 9.22: Exercise: How Should You Present?

5 minutes

- Draw four columns on a flipchart for each of the questions.
- Go around the room and ask each participant to tell which graph should be used for which question. Write participant responses in the appropriate columns.
- Review the participant responses and compare them to the following list of answers:
 - Line graph
 - Bar graph
 - Pie graph
 - Histogram

Data Presentation Summary

- Make sure you present your data in a consistent format,
- Use the right graph for the right data and the right audience,
- Label the components of your graphic (title, axis),
- Indicate source of data and number of observations (n=xx), and
- Make sure you use readable colors and typefaces.

Session 9: Data Presentation 23

Slide 9.23: Data Presentation Summary

2 minutes

- Remind participants that they should present their data in a consistent format using the right type of graph for the right data and right audience.
- Remind participants that they should also label all components of their graphs and indicate the data source and number of cases.
- Remind participants to make sure that the colours and fonts are readable and not distracting.

Scenario Exercise: Data Presentation

- How would you present your data on the HIV/AIDS campaign?

Session 9: Data Presentation 24

Slide 9.24: Scenario Exercise: Data Presentation

40 minutes

- Ask participants to turn to the data presentation exercise in their booklets on page 171. Assign each team two of the four exercises to work on.
- Hand out a piece of flipchart paper and some markers.
- Allow teams 20 minutes to draw their graphs and 20 minutes for the teams to present their graphs and for the group discussion.

Acknowledgements

This presentation was adapted from MEASURE Evaluation.

MEASURE Evaluation is a MEASURE programme project funded by the U.S. Agency for International Development (USAID) through Cooperative Agreement GHA-A-00-08-00003-00 and is implemented by the Carolina Population Center at the University of North Carolina at Chapel Hill, in partnership with Futures Group International; John Snow, Inc.; ICF International; Management Sciences for Health; and Tulane University.

Visit us online at <http://www.cpc.unc.edu/measure>.

Session 9: Data Presentation 25

Slide 9.25: Acknowledgements

1 minute

- Mention that this session was adapted using information from a MEASURE Evaluation training.

Lunch



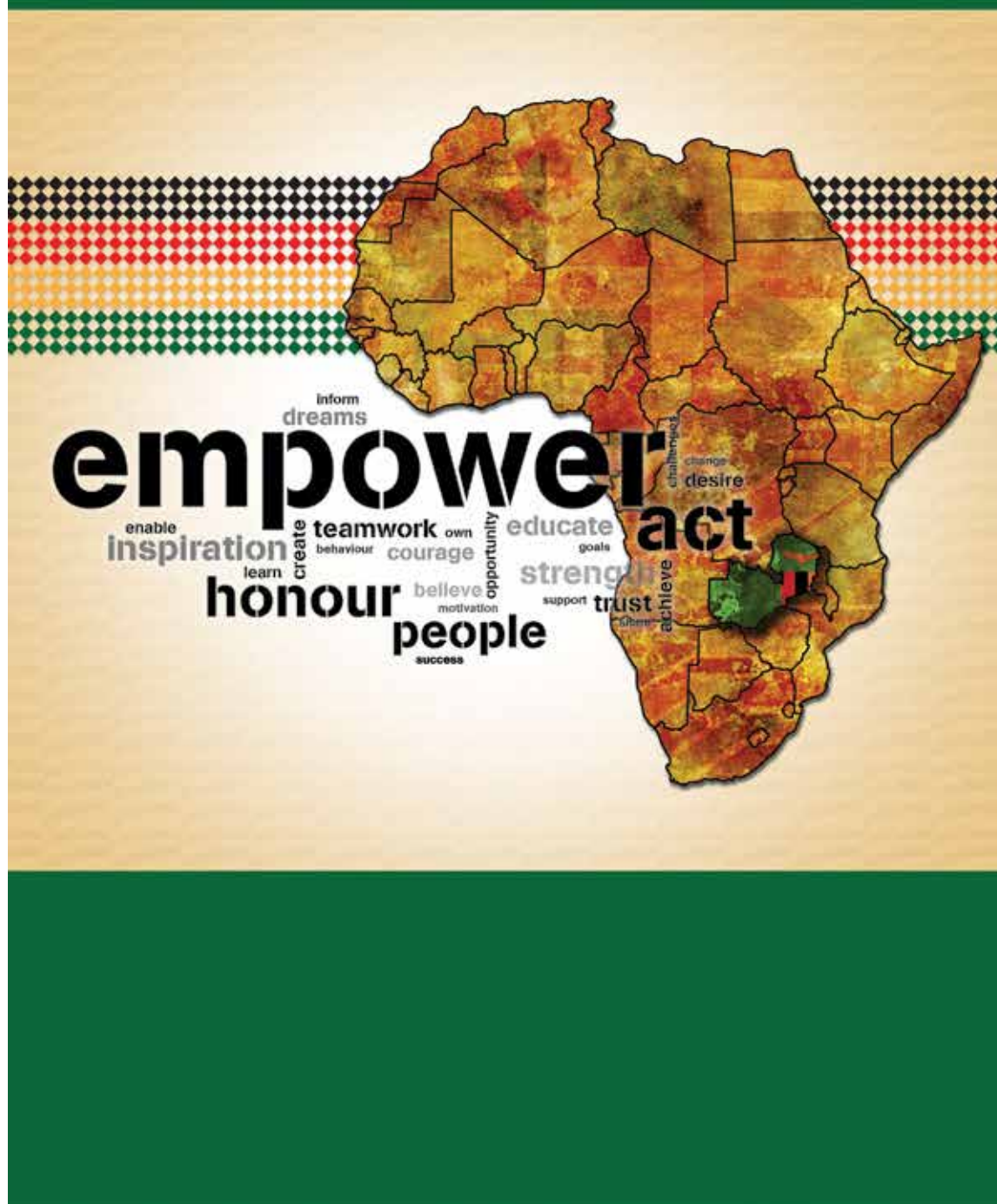
Energiser 3: Toss the Ball

15 minutes



- Ask everyone to stand up and form a circle.
- Kick a football to a participant and ask that person to tell the group what he or she thought was the most important thing learned in the training so far.
- Ask that person to kick the ball to someone else and ask him or her to tell the group what the most important lesson learned was.
- Continue this exercise until everyone has shared his or her lessons learned.

SESSION 10



Session 10: Data Interpretation

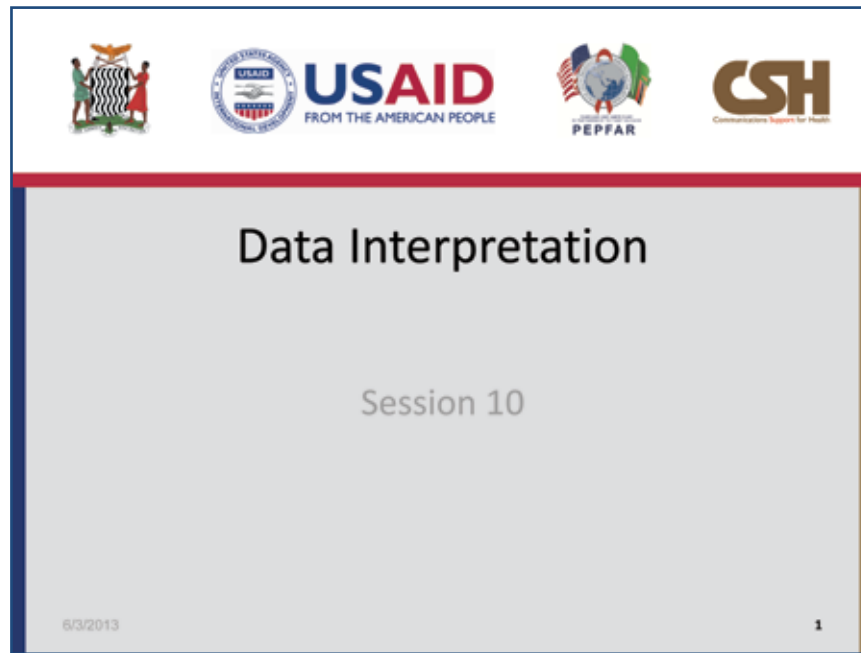


45 minutes

<p>Session Objectives</p>	<ul style="list-style-type: none"> • Describe the difference between analysis and interpretation • Interpret information presented in sample tables and graphs
<p>Methods</p>	<ul style="list-style-type: none"> • Lecture • Group discussion • Scenario exercise
<p>Materials</p>	<ul style="list-style-type: none"> • Flipchart • Markers

KEY DISCUSSION POINTS

- Highlight that sometimes when trying to interpret data, the results end up creating more questions about the implementation of the campaign. In this scenario, it may often be the case that one will need to draw on other data to be able to fully interpret or understand the results.
- Stress the importance of setting up processes or a system whereby the programme and M&E folks working on the BCC campaign regularly review monitoring data to understand how their BCC campaign is progressing and to inform ways in which the campaign could be improved. Such a process or system can help to prevent collection of data that is never used to inform the improvement of the campaign.



Slide 10.1: Data Interpretation

1 minute

- Explain that this session will address some basic concepts for interpreting data.

Objectives

- Participants will be able to
 - Describe the difference between analysis and interpretation, and
 - Interpret information presented in sample tables and graphs.

Session 10: Data Interpretation 2

Slide 10.2: Objectives

2 minutes

- Read each of the objectives.
- Ask participants:
 - Does anyone have any questions before we begin with the session?
- Ask participants:
 - What is the difference between analysis and interpretation?

Analysis vs. Interpretation

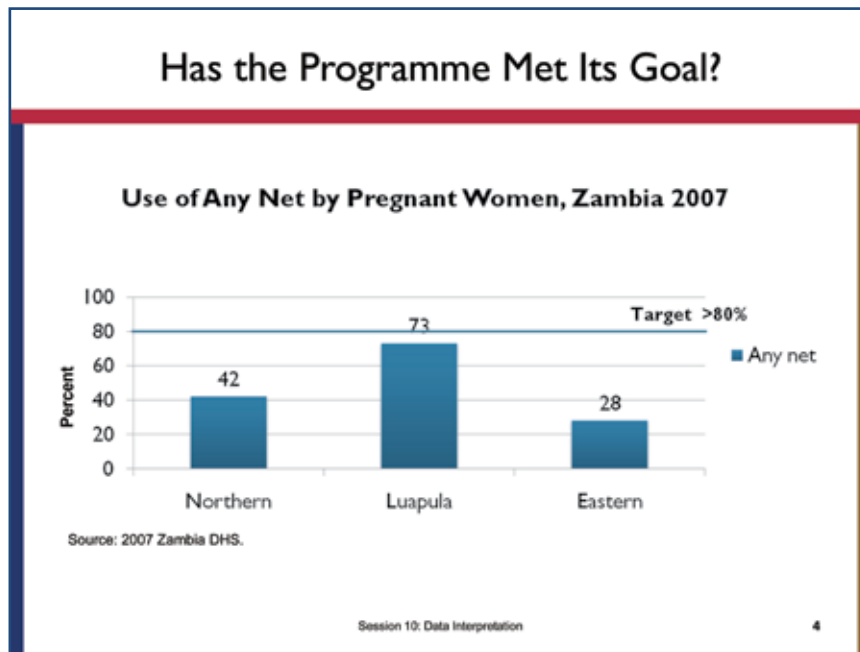
- **Analysis:** describing data with tables, graphs, or narrative; transforming data into information; and
- **Interpretation:** adding meaning to information by making connections and comparisons and by exploring causes and consequences.

Session 10: Data Interpretation 3

Slide 10.3: Analysis vs. Interpretation

1 minute

- Explain that analysis is summarising the data and turning them into information. Interpretation is the process of making sense of the information. Interpretation is taking the information and figuring out what it means for your programme.



Slide 10.4: Has the Programme Met Its Goal?

3 minutes

- Ask participants to pretend that they are managing a malaria programme and point out that the programme target is to have 80 percent of surveyed pregnant women say that they intend to sleep under a net or ITN every night.
- Ask participants:
 - Have we met our goal?
 - How can you tell?
- Discuss that the goal has not been met. Luapula is close to attaining the goal but is still 7 percent under it for pregnant women expressing intent to use nets. Eastern and Northern provinces are far below the target goal of 80 percent.

Interpreting Data

- Does the indicator meet the target?
- What is the programmatic relevance of the finding?
- What are the potential reasons for the finding?
- What other data should be reviewed to understand the finding (triangulation)?
- How does it compare (trends, group differences)?
- Do we need to conduct further analysis?

Session 10: Data Interpretation 5

Slide 10.5: Interpreting Data

1 minute

- Note that when interpreting data, we may ask these questions:
 - Does the indicator data meet the target?
 - What is the programmatic relevance of the finding?
 - What are the potential reasons for the finding?
 - What other data should be reviewed to understand the finding? This is known as triangulation.
 - How does it compare (e.g., trends, group differences)?
 - Do we need to conduct further analysis?
- Explain that these questions can help you figure out the relevance of the data for the programme.
 - For example, if you have an unmet target for the programme, is it because you are not meeting your coverage goals? Because you are not targeting the right audience? Because you are not using the correct communications channel?
- Explain that a key to interpreting data is to ask yourself, “What could be causing this?”

Practical

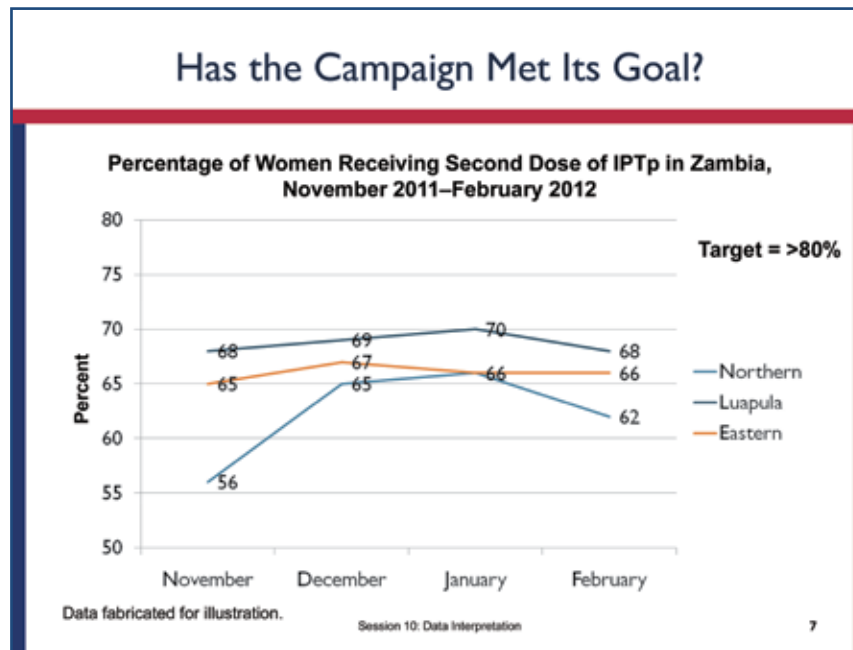
- You are conducting a campaign to increase women’s uptake of IPT during antenatal visits.
- Your monitoring plan also looks at women’s
 - Intentions to receive IPTp, and
 - Attitudes and beliefs about the treatment.
- You need to provide recommendations or guidance on how well the campaign is doing in promoting IPTp.
- What information should you consider?

Session 10: Data Interpretation 6

Slide 10.6: Practical

1 minute

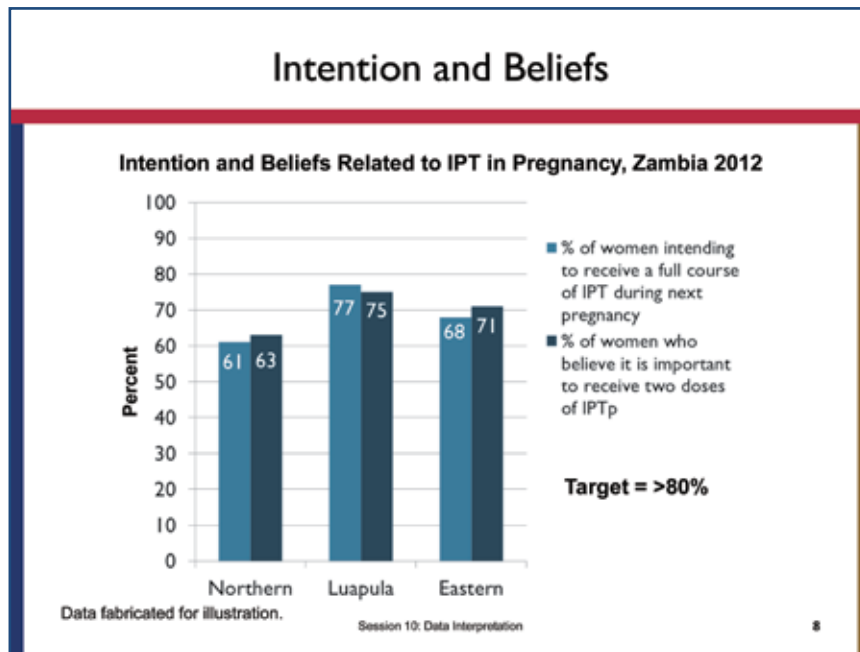
- Explain that you are going to take data interpretation from the theoretical to the practical application.
 - You are conducting a campaign to increase women’s uptake of IPT during antenatal visits.
 - In your monitoring plan, you are also looking at women’s intentions to receive IPTp, and their attitudes and beliefs about the treatment.
- Ask participants:
 - What information would you want to consider in answering the question on how well the campaign is doing in promoting IPTp?
- Note to facilitator: Suggested data points for consideration could be
 - Change (or no change) in women’s intentions to receive IPTp, attitudes and beliefs about IPTp, clinic coverage data, and discrepancies in coverage data by geographic area, compared to campaign activities in those areas.
 - Look for data that can tell you (a) how well the goal is being met and (b) differences in data that may tell you key reasons for differences between target areas if one area is working well and one is not.



Slide 10.7: Has the Campaign Met Its Goal?

3 minutes

- Ask participants:
 - Has the campaign met its goal?
 - How can you tell?
 - What else can see you in this graph?
 - What else might you want to know after looking at this graph?
 - Note to facilitator:
 - No, the campaign has not met its goal. In this illustration, Luapula province is the closest to meeting the goal, but it is still 10 percent away from 80 percent during the peak in January.
 - Note that the data are mostly consistent in moving up or down (up from November to December, down or steady from January to February). What was happening during those months? A campaign? A change in the weather that might affect behaviour?



Slide 10.8: Intention and Beliefs

3 minutes

- Ask participants to take a look at this chart, which provides some information on behavioural intent and beliefs.
- Ask people to look at slide number 7 in their participant books and compare the uptake data with the intention and belief data.
- Ask participants:
 - How do you interpret these data?
 - What could you say about trends or relationships?
- Note to facilitator: Note that intentions and beliefs track quite consistently with behaviour.

Making Recommendations

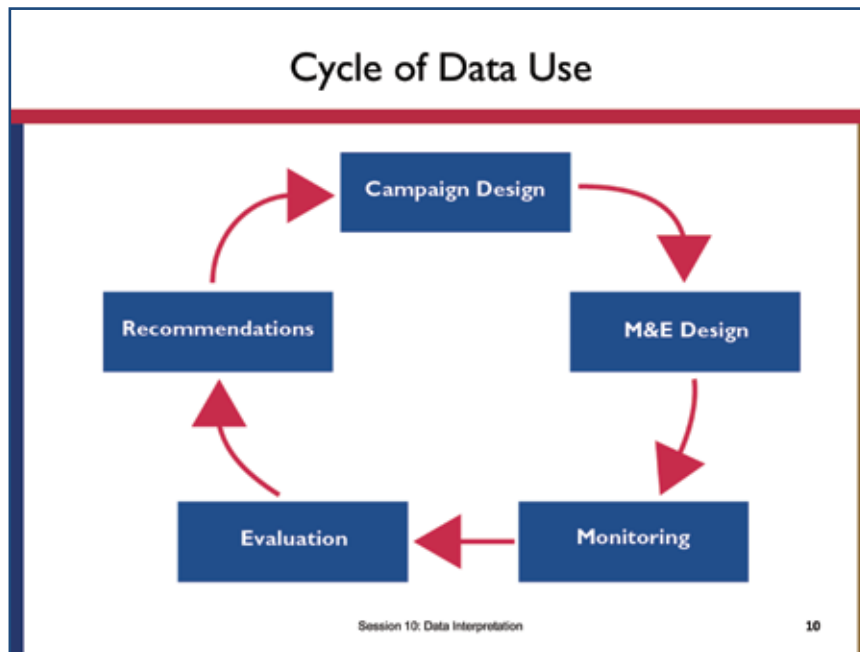
- If you were managing this project, how would you use these data to advise the campaign?
- What other data or information should you consider in providing recommendations or guidance on how well the campaign is doing in promoting the use of IPTp?
- What happens to the recommendations you will make?

Session 10: Data Interpretation 9

Slide 10.9: Making Recommendations

3 minutes

- Ask participants:
 - If you were managing this project, how would you use these data we just discussed to advise the campaign?
 - What other data or information should you consider in providing recommendations or guidance on how well the campaign is doing in promoting the use of IPTp?
 - What are some recommendations you would have for this campaign?
- Note to facilitator: Given the connection between beliefs, intention, and behaviour, it may be worthwhile to explore what could be done to change beliefs or change intent.



Slide 10.10: Cycle of Data Use

2 minutes

- Explain that the use of M&E data is part of a larger campaign design and implementation cycle.
 - The cycle begins with the campaign design, which informs the M&E design.
 - This, in turn, informs how you would conduct your M&E.
 - The findings from your M&E efforts will then inform recommendations for campaign revision, which brings you back to campaign design and continues the cycle of data use.
- Mention that if M&E results include some interesting findings that might be useful for other campaigns or BCC initiatives, participants should consider trying to disseminate the results to an academic publication or media outlets or perhaps presenting the findings at a conference.

Using Data in the Campaign

- Present trends,
- Have discussion between M&E staff and programme staff on what the findings mean for the programme,
- Develop strategic plan for campaign improvement based on results,
- Update your M&E plan, and
- Gather new data.

Session 10: Data Interpretation 11

Slide 10.11: Using Data in the Campaign

2 minutes

- Explain that applying M&E data to the campaign revision is a process that would begin with presenting trends in the data and having a discussion with the team about what these trends may mean for the campaign.
- Note that the next step would be for M&E and programme staff to work together to develop strategic plans for campaign improvement. The M&E staff would then update the M&E plan based on the changes to the campaign and would begin collecting the data for the updated plan.

Scenario Exercise: Data Interpretation

- Look at the sample graphs from the HIV/AIDS campaign on pages 175–178 of the participant booklet.
- Discuss possible responses to the discussion questions, based on the sample graphs.
- Present your graphs and interpretations of the graphs to the rest of the participants.

Session 10: Data Interpretation 12

Slide 10.12: Scenario Exercise: Data Interpretation

30 minutes

- Ask participants to look in their booklets for the sample graphs from the HIV/AIDS campaign on pages 175–178 and the pieces of flipchart paper. Assign two graphs (of the four) to each of the M&E teams to interpret, and ask them to respond to the discussion questions in the *Participant’s Guide* on those pages.
- Allow teams 15 minutes to interpret their graphs, and 15 minutes for the teams to present their graphs and interpretations and for the group to discuss what each team decided.

Acknowledgements

This presentation was adapted from MEASURE Evaluation.

MEASURE Evaluation is a MEASURE programme project funded by the U.S. Agency for International Development (USAID) through Cooperative Agreement GHA-A-00-08-00003-00 and is implemented by the Carolina Population Center at the University of North Carolina at Chapel Hill, in partnership with Futures Group International; John Snow, Inc.; ICF International; Management Sciences for Health; and Tulane University.

Visit us online at <http://www.cpc.unc.edu/measure>.

Session 10: Data Interpretation 13

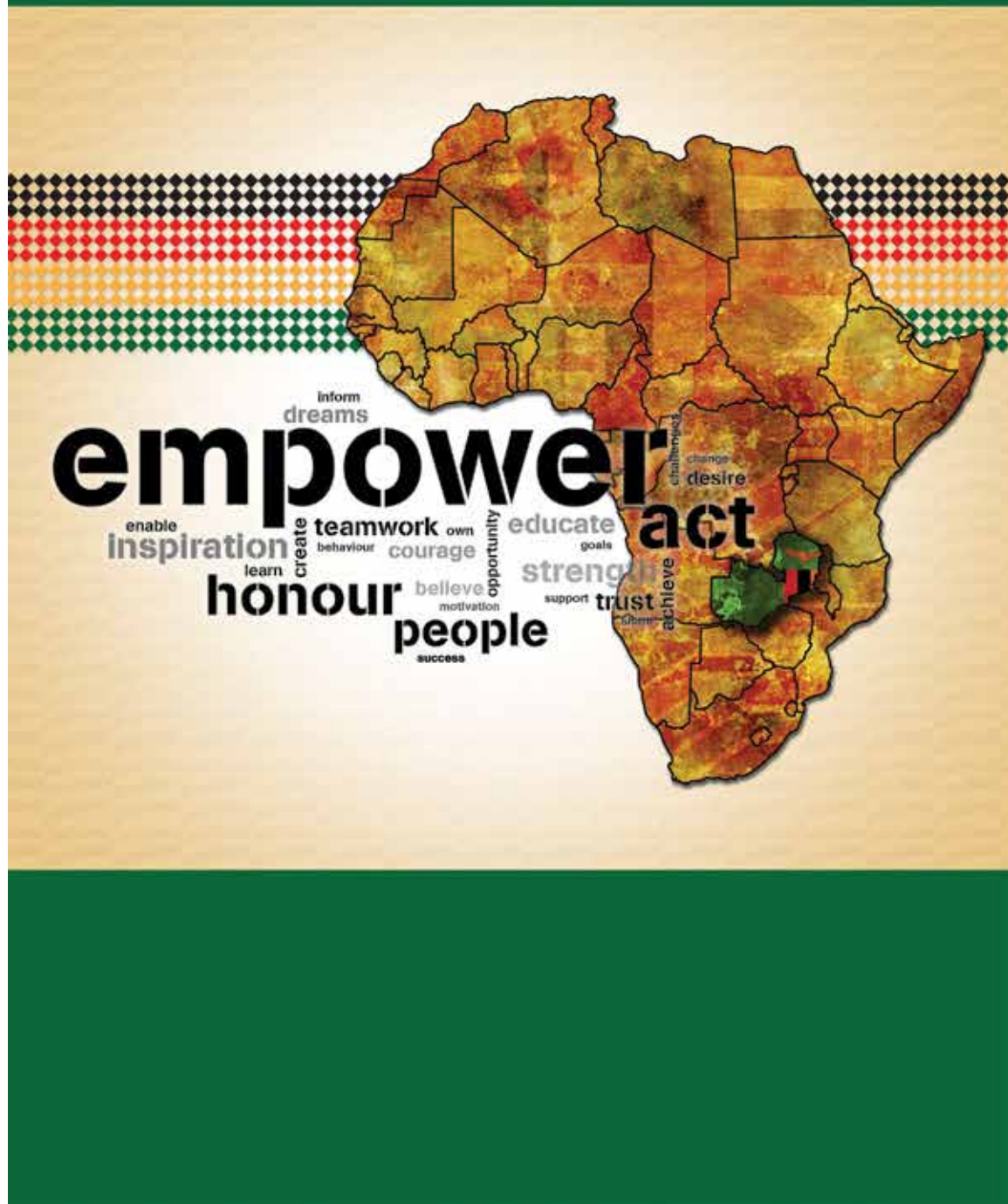
Slide 10.13: Acknowledgements

1 minute

- Mention that this session was adapted using some information from a MEASURE Evaluation training.

Tea Break

SESSION 11



Session 11: Putting It All Together



51 minutes

<p>Session Objectives</p>	<ul style="list-style-type: none"> • Reflect on the training as a group • Report on participants' experience with the scenario exercises
<p>Methods</p>	<ul style="list-style-type: none"> • Group discussion • Exercise
<p>Materials</p>	<ul style="list-style-type: none"> • Flipchart • Markers

KEY DISCUSSION POINTS

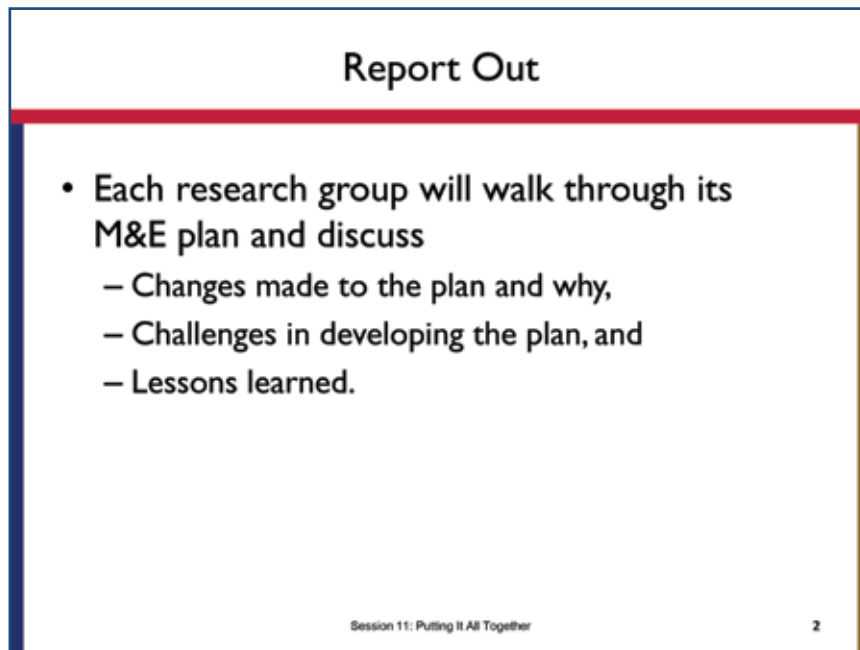
- Note that the aim of this session is really to bring together all the different pieces we covered in the training. It will allow us to see how all the elements of the M&E plan fit and also to better understand what information we will need to be able to develop a comprehensive M&E plan for our BCC campaign.



Slide 11.1: Putting It All Together

1 minute

- Explain that this is the last technical session and that before the training ends participants will report out on the work they have completed with the scenario exercises.



Slide 11.2: Report Out

25 minutes

- Spend some time asking each of the teams about its experiences with the scenario exercise and putting the training concepts into practice.
- Explain that they should pick one member of each group to walk through the M&E plan, going over each of the concepts we discussed during the scenarios. Talk about the changes you made to your plan in the process and why you made those changes.
- Ask also about any lessons learned—whether it was about the concepts addressed in the exercises, through working with your group, or something else.
- Ask the participants:
 - What components of developing an M&E plan for the scenario were the most difficult? Easiest?
 - What challenges did you face as a team and on an individual level in developing your plan?
 - How would you handle these challenges in the real world?
 - What important lessons did you learn from the exercises, working with your team, or in general from the training content?

Put Your Expertise to the Test

- What do you think of this campaign plan?
- What information will help you write your M&E plan?
- What information is missing or incomplete?

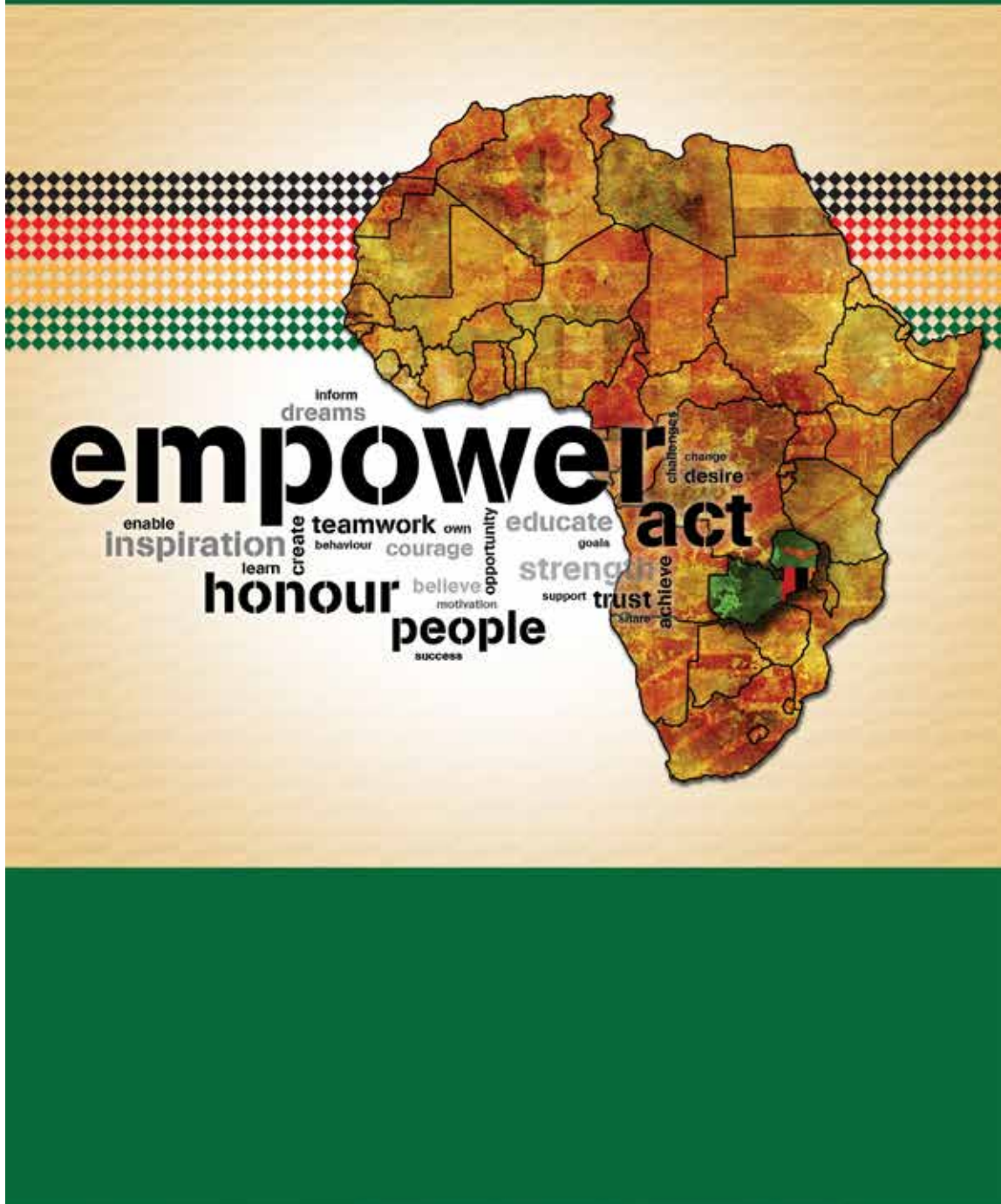
Session 11: Putting It All Together 3

Slide 11.3: Put Your Expertise to the Test

25 minutes

- Explain that this is the last exercise for the training. In it, participants will review a brief campaign plan and use what they learned in training to assess how helpful this campaign plan will be in informing an M&E plan. Ask participants to work on their own to identify what is missing and/or what information is unclear. Ask participants to turn to and read the malaria campaign plan on page 180 of their *Participant's Guide*.
- Highlight again that it is important for programme staff to know what needs to go into a campaign plan to help create an M&E plan AND it is important for M&E staff to be able to easily assess campaign plans for gaps and to ask programme staff for more information.
- Allow participants 10 minutes to review the campaign.
- Allow 15 minutes for an open group discussion.

SESSION 12



Session 12: In Closing



15 minutes

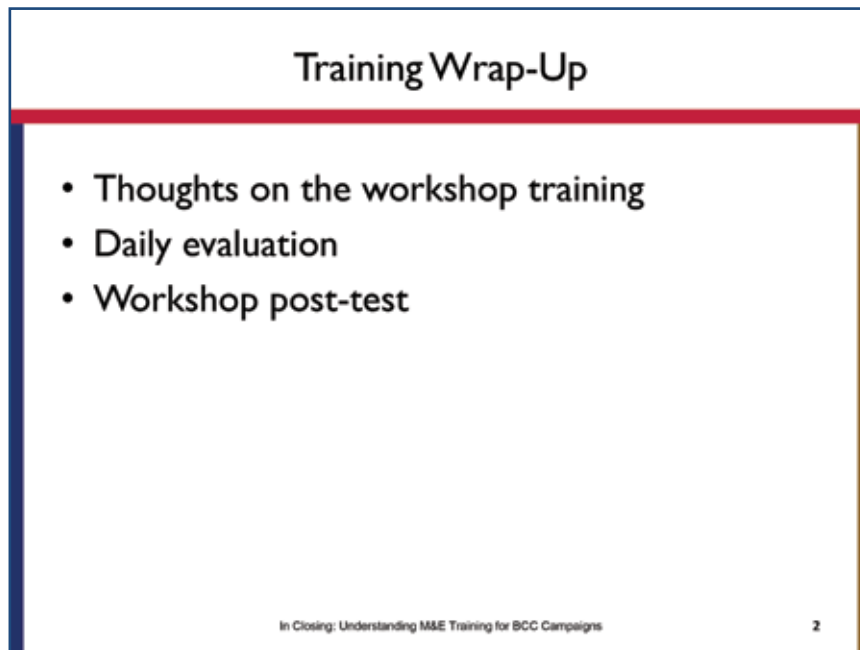
Session Objectives	<ul style="list-style-type: none"> • Reflect on the training as a group • Thank participants for their time and active participation
Methods	<ul style="list-style-type: none"> • Group discussion
Materials	<ul style="list-style-type: none"> • Flipchart • Markers



Slide 12.1: In Closing

1 minute

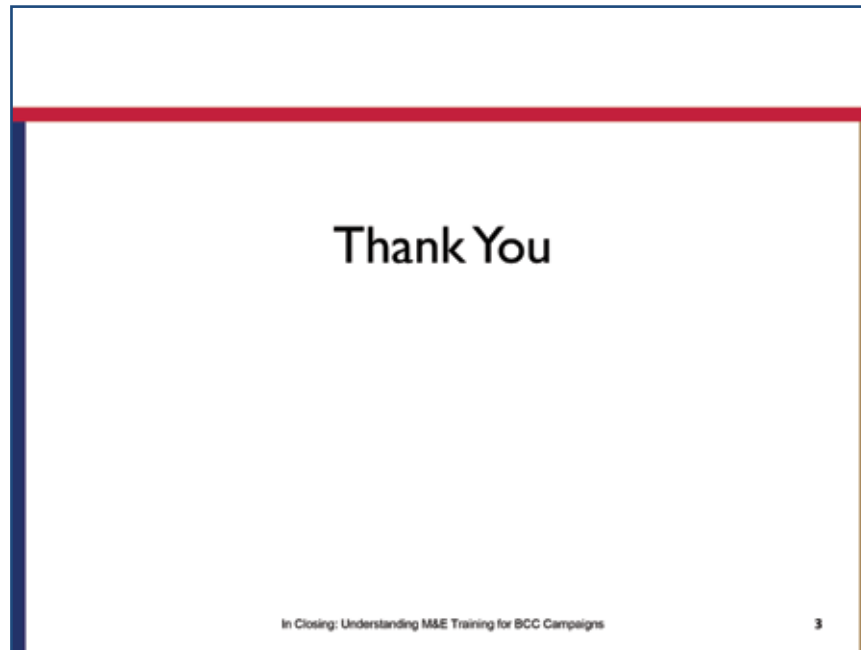
- Explain that this is the last session of the training. We will use it to wrap up any questions or parting thoughts participants would like to share, and to fill out evaluations for the training.



Slide 12.2: Training Wrap-Up

5 minutes

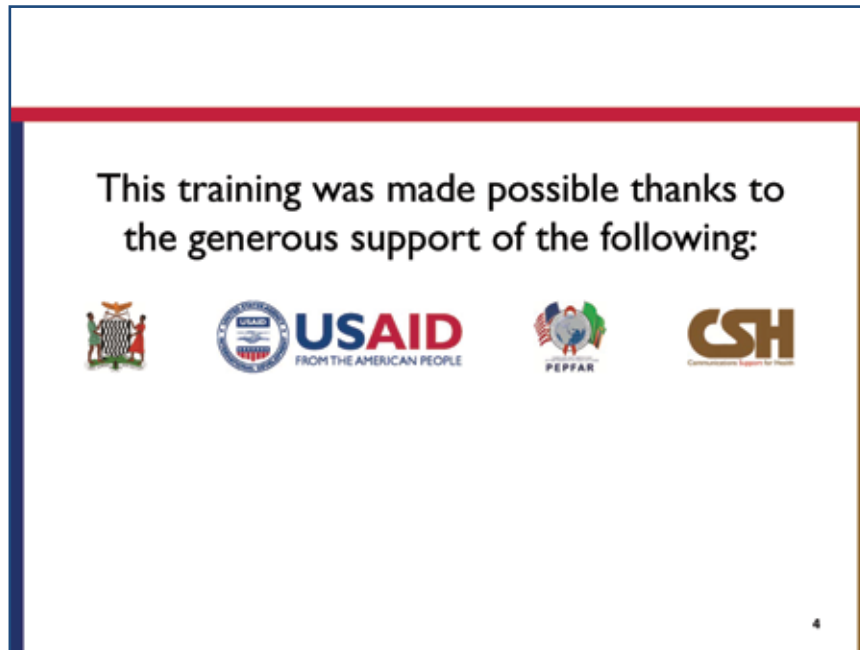
- Explain that we would like to get participant feedback one last time.
- Ask participants:
 - What information did you find most useful?
 - How do you plan to use this information?
 - What do you wish you got out of the training, but didn't?
- Hand out the daily evaluation forms and training post-tests. Ask participants to complete the forms at the end of the session.



Slide 12.3: Thank You

5 minutes

- Thank everyone for their time and participation.
- Explain that you are going to award participants with a certificate of training completion for all of their hard work.
- Call each participant up to the front of the room to collect a certificate.
- Write down the contact information of the facilitator(s) and tell participants that they can contact that person with any further questions or thoughts on M&E for BCC campaigns.



Slide 12.4: [Acknowledgements slide]

5 minutes

- Explain that the training curriculum was developed by CSH for the GRZ. It was funded by USAID and PEPFAR.

Administrative Task 7



Day Three Evaluation

Time: 10 minutes

Process:

1. Remind participants that the purpose of the daily evaluation is to gather feedback on Day Three of the training.
2. Distribute the daily evaluation forms.
3. Tell participants that they will have 10 minutes to complete the form.
4. Remind participants not to write their names on the forms.
5. Ask participants to turn their forms face down when completed.
6. Collect all completed forms and store them to review later.

Materials:

- Daily evaluation forms
- Pens or pencils

Administrative Task 8



Training Post-Test

Time: 15 minutes

Process:

1. Explain that the purpose of the post-test is to measure participant knowledge of monitoring and evaluation of behaviour change communication campaigns after the training, and their responses will be compared to their responses to the pre-test. Explain that the evaluation team will compare the responses to assess the change in participants' knowledge as a result of the training.
2. Distribute the post-test forms.
3. Ask participants to label the tests with the last four digits of their National Registration card.
4. Tell participants they will have 10 minutes to complete the form.
5. Remind participants not to write their names on the form.
6. Ask participants to turn their forms face down when completed.
7. Collect all completed forms and store them to review later.

Materials:

- Post-test forms
- Pens or pencils

NOTES: